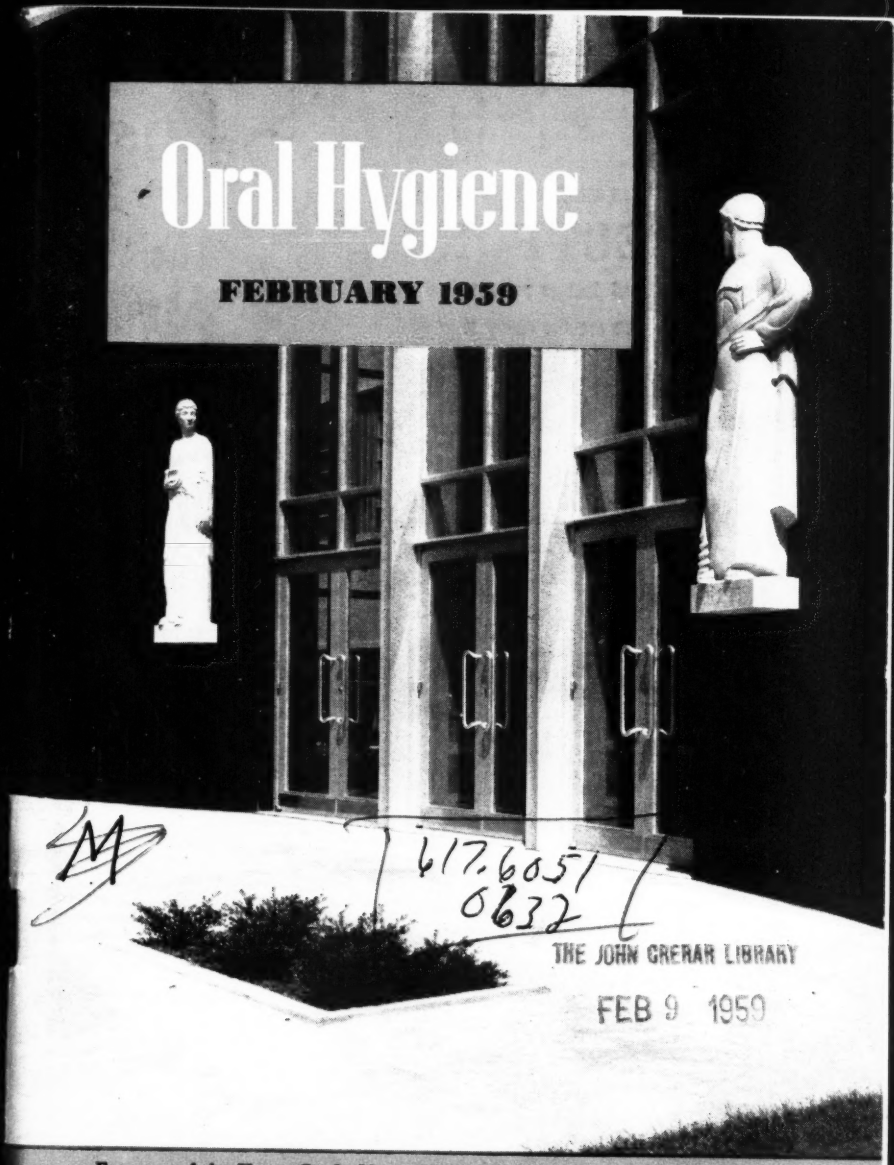
Oral Hygiene

FEBRUARY 1959



Entrance of the Henry Grady Memorial Hospital in Atlanta. The Thomas P. Hinman Dental Clinic will be held in Atlanta, Georgia, March 15 through 18.

In this issue:

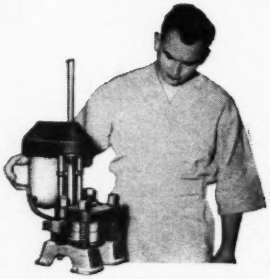
LAST MINUTE POINTERS FOR YOUR 1958 INCOME TAX RETURN

Why do so many dentists specify

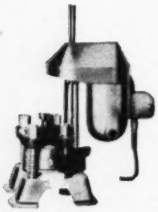
JECTRON

for all denture patients?

Here are the reasons:



JECTRON's MODERN TECHNIQUES MEAN BETTER DENTURES



1. *Newer, Better Resin*—Jectron dentures are made from a complex combination of styrenes that are pre-cured before processing. The resin contains no acrylic. Jectron polystyrene is not subject to the internal stress and strain so common to all acrylic dentures.

   Clinical Result: Because they are made of this newer, better denture resin, Jectron dentures do not shrink, warp or water-swell. They are absolutely form-stable in mouth service, fit comfortably from the first, with retention that lasts and lasts and lasts.

2. *Foolproof Molding Technique*—Jectron dentures are processed by Trans-injection molding, a continuous, controlled operation that eliminates the possibilities for error inherent in old-fashioned, hard-to-control processing methods.

Clinical Result: Because of this newer, better processing technique, Jectron dentures virtually eliminate open bites.

These modern techniques make Jectron dentures unique. They can help you, too, to build your denture practice. *Specify Jectron* for all denture patients.

IMPORTANT NEWS:

Jectron dentures are now available in three shades:

Natural Jectron

Jectron Tissu-Blend L (red hue) for patients with lighter complexions

Jectron Tissu-Blend D (blue hue) for patients with darker complexions

Tissu-Blend is Jectron's name for tiny veins of lifelike beauty, locked by pre-curing into the Jectron polystyrene bar.

JECTRON COMPANY

1009 Jackson Street • Toledo 1, Ohio

SUPERIOR TO ASPIRIN OR

BUFFERED ASPIRIN...

BEFORE and AFTER

PAINFUL PROCEDURES

Whenever scaling, cleaning, instrumentation or subgingival area treatment are apt to be painful – patients will appreciate the prolonged relief which Anacin gives. In addition to relieving pain, Anacin Tablets have a special selective sedative action – superior to aspirin or buffered aspirin. Anacin exercises a *better total effect* in pain-relief by minimizing tension and inducing a noticeable degree of freedom from anxiety. Anacin leaves the patient more relaxed – an exemplary state which invites co-operation and confidence. Excellent tolerance. Anacin lessens the need for narcotics or barbiturates. Preferred by more dentists than any other analgesia.

Always

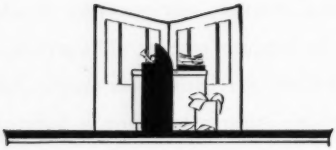
ANACIN®

FOR A BETTER TOTAL EFFECT

WHITEHALL LABORATORIES,
NEW YORK, N.Y.

The Publisher's CORNER

By Mass



No. 451

No More Massols

On Massol Avenue

JANEY came in with the CORNER mail, pantomiming the single thin-looking letter as almost too heavy for her to lift. "Look, Boss, you hit the jackpot today! But I hope I didn't flip a disc or something."

"We will take care of that risk," I said. "Next time there's heavy lifting, go downstairs and hire four small lads—reasonably clean—and have them do the heavy heaving for you. If dirty boys are cheaper, fine, and in tune with our business philosophy." Janey muttered something. "And *now* what?" I asked.

"Look, Boss! Notice this letter is from 353 Massol Avenue in Los Gatos, California. It's from a Doctor Alvin Burgess. . . ."

"Wait!" I squealed. "Massol Avenue, Los Gatos! Why that's where my sister Marjory and I were born."

"I know, Boss. You must have told me at least ninety times;

(*Continued on page* 6)

A SUPERB NEW UNIT BY WEBER

the beautiful ATM-500* with the New Weber Air Turbine Handpiece

1. Push Button Controls — New freedom and greater convenience. Speed control and spray control knobs are close at hand for easy, swift adjustment.

2. Air Pressure Gauge is highly visible and calibrated in pounds pressure to the handpiece for accurate speed control and compressor performance. Check it at a glance!

3. New Air Turbine Handpiece Hanger is supplied at no extra cost. Rotates into the position most convenient for you and then locks to provide a fixed position that eliminates groping and fumbling. Hose tension is eliminated which gives you freedom of movement.

4. Ultra Flexible Twin Tubing — For your protection there are **no** concealed tubings.

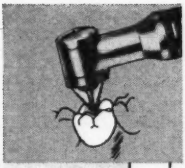
5. Superior Lubricating System (And Exposed Lubricator Dome) — Positive pressure lubrication — adjustable oiler suited to the air pressure you require. Oil reservoir checked and refilled from the outside — bowl graduated in centimeters to check proper oil consumption.

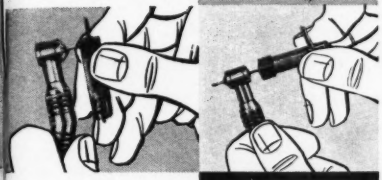
ONE FOOT CONTROL — for **both** Air Turbine and Standard Handpiece. **No change in foot control habits.**

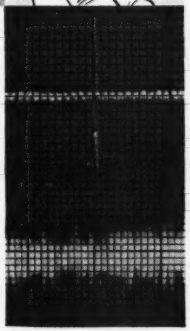
Exclusive: Foot controller also controls air/water spray. By moving pedal into fourth position, water is shut off and air **only** emits from air handpiece spray ports for use as chip blower, etc.

SEE YOUR- WEBER DEALER

* Patents Pending







Oscilloscopic tests prove: Weber Air Turbine Handpiece — No perceptible vibration.

Oscilloscopic tests prove: Belt-driven handpiece—Highly perceptible vibration.

take advantage of these Weber features:

Twin Spray — Built-in-dual water and air outlets provide superlative coverage for positive control of tooth temperature in all cutting procedures — mesial, distal, buccal, lingual or occlusal.

Push In-Push Out bur insertion and removal for utmost convenience and longer bur life. Uses standard latch type burs and diamonds.

Sterilization — Can be sterilized by conventional methods.

Quick Hose Disconnect — Simplifies sterilization.

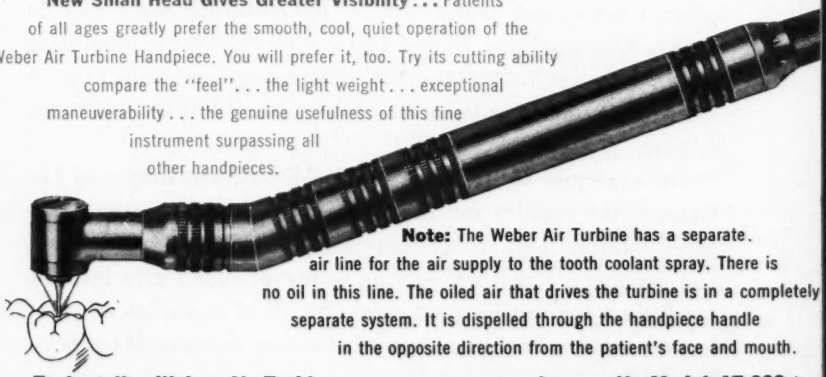
Superior Filtration System — Positive Air filtration — air filter removes all particles more than 5 microns in size. Clean out valve is drained from outside.

Waterproof Coils — Solenoid valves totally enclosed from dust, moisture — insures against short circuits.

Torque and speed depend on air pressure as controlled by you. The torque will sustain the cutting procedure you require!

Speed range is 100,000 to in excess of 300,000 R. P. M. with no perceptible vibration.

New Small Head Gives Greater Visibility . . . Patients of all ages greatly prefer the smooth, cool, quiet operation of the Weber Air Turbine Handpiece. You will prefer it, too. Try its cutting ability compare the "feel". . . the light weight . . . exceptional maneuverability . . . the genuine usefulness of this fine instrument surpassing all other handpieces.



Note: The Weber Air Turbine has a separate air line for the air supply to the tooth coolant spray. There is no oil in this line. The oiled air that drives the turbine is in a completely separate system. It is dispelled through the handpiece handle in the opposite direction from the patient's face and mouth.

To install a Weber Air Turbine on your present unit, specify Model AT-200*

Color matched or silvertone.

So easy to finance . . . You and your patients can enjoy all the plus benefits now! Use the Weber finance plans — Model AT-200 can be financed too! ORDER NOW!

The WEBER DENTAL *Manufacturing Company, Canton 5, Ohio*

you certainly do inform people about things. But you never told me about any Massol Avenue *dentist.*"

"I never knew one. But let's see what's on this one's mind."

"Dear Mr. Massol," the letter began. "Just a note to let you know that I am the first dentist to have offices on Massol Avenue. I attended a dental meeting in San Francisco and there ran into a very good friend of mine—Walter Randall of the Edwards Company. I understand that he's your good friend, too. It was Walter who told me about you and the Massol family.

"I moved up here from the San Joaquin Valley about four years ago and chose this location because my family and I fell in love with the Los Gatos area.

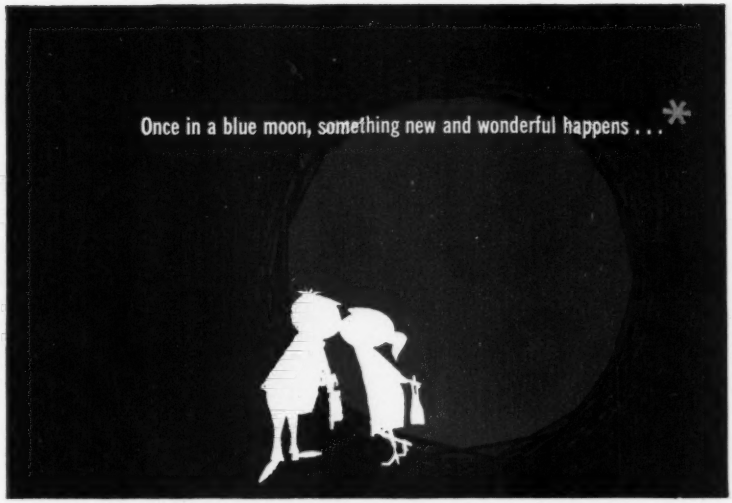
"I read your book ORAL HYGIENE from cover to cover each issue and enjoy it immensely. I like its size and shape because I can read ORAL HYGIENE in bed very comfortably.

"Anyway, Mass, I just had to tell you that you now have a dentist on the street named for the Massols."

And Massol Avenue can be proud of Al's dental offices.

Since he and I met in the mailbox, we've seen a lot of each other. I spent most of last summer in California, much of it in the Los Gatos country. Al and I have unearthed some interesting information (at least *we* think it's interesting) and hope to print a few paragraphs and pictures here in the CORNER from time to time.

For example: my father, Fenelon Massol, was mayor of Los Gatos in the eighties and nineties. His hobby was raising pedigreed hunting dogs. I can remember those days. Raising dogs and running a ranch and serving as mayor didn't give Dad too much time for watching expenses. So all of a sudden one day in pranced the sheriff and soon there were no more Massols on Massol Avenue.



PHYSIOLOGIC SHADES

available exclusively in Swissedent's new CR vacuum-fired teeth

***Youthful shades with a bluish incisal,** like youthful natural teeth.

***Older shades with added color texture,** like older natural teeth.

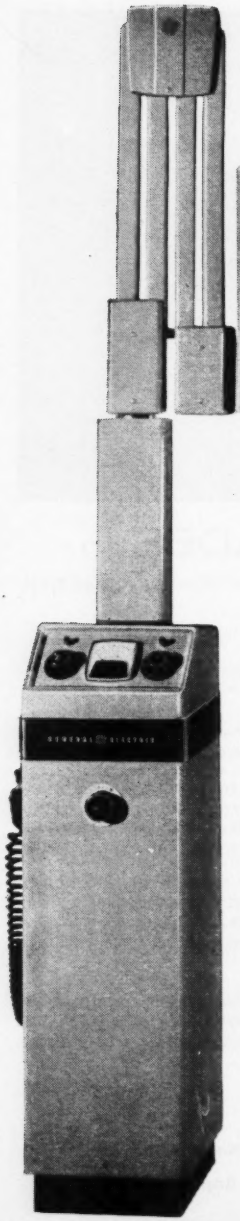
With your own patients you have observed how living teeth **age physiologically**, the same as the skin and the hair. You have undoubtedly noticed the fresh, unmarred enamel and the bluish incisal that are characteristic of younger natural teeth . . . and how, through abrasion, this bluish incisal usually disappears in the thirties. Thereafter, pigments penetrate the teeth at the abraded edge, producing the color texture so characteristic of mature teeth.

Swissedent CR porcelain teeth are the only artificial teeth made with these beautiful, natural color characteristics . . . so vital in the creation of restorations that are in harmony with the **apparent age** of each of your patients.

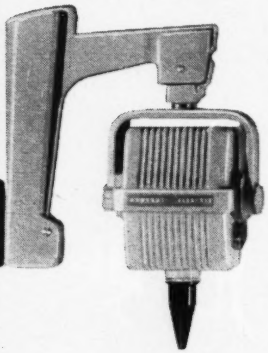
Experience the thrill of seeing Swissedent CR teeth **in the mouth**. Ask your dental laboratory for Swissedent CR teeth and the new Swissedent CR shade guide.

Swissedent

373 No. Western Ave.,
Los Angeles 4, California.



GE 90-II — range from 40 to 90 kvp at 10 or 15 ma. Choice of fixed or mobile base.



FIRST WITH ELECTRONIC TIMING

NEW!

EXCLUSIVE!

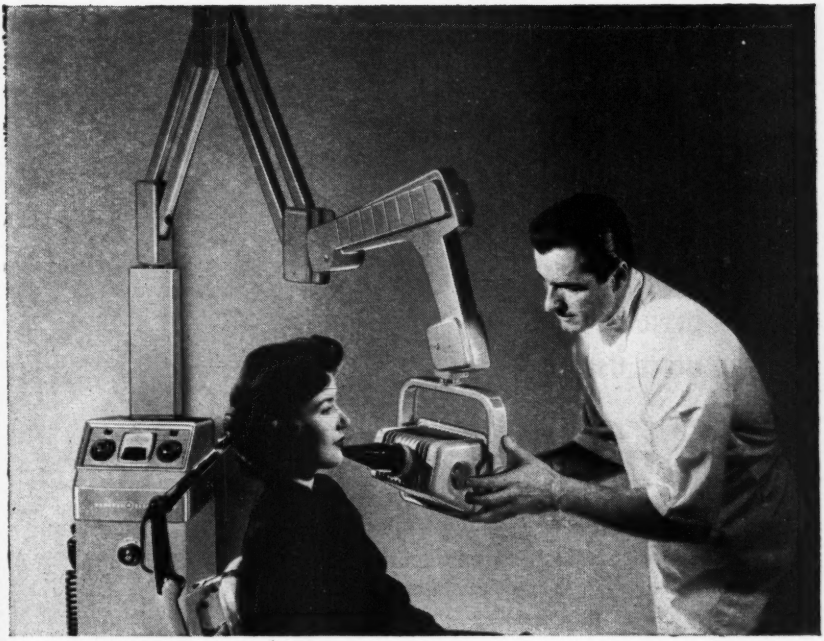
YOU SIMPLY DIAL

no test exposures, no mental

What a discovery when you try these improved G-E x-ray units with new *electro-stabilized* controls. You'll find radiography so easy, so sure, so extra safe. It's another *first* from General Electric — self-correcting x-ray output that eliminates waste motion and guesswork when dialing technic. Every exposure is exactly as you set it. And there's never any need for test exposures to confirm x-ray output.

Exclusive new "set and shoot" controls are yours in both the GE 90-II and GE 70-II . . . added to all the original features that have made them dentistry's most popular radiographic units.

For full facts on GE 90-II and GE 70-II, see your dental dealer. Or write X-Ray Dept., General Electric Co., Milwaukee 1, Wis., for Pub. KK-23.



PRECISE X-RAYS

calculations, no guesswork

- ***Exposures to 1/30 second***
  24 precise settings — 14 are fractional second! Uniform exposure-density change for every step.
- ***X-ray tube lasts longer***
  High-kilovoltage radiography reduces wear and tear. And wasteful test exposures are *eliminated*.
- ***Top operating safety***
  90-kilovolt power and wide-range electronic timing let you take maximum advantage of new high-speed film—with *dramatic reductions* in the amount of x-ray required to reproduce optimum film density.

GE 70-II—Value-priced companion to GE 90-II. Fixed output 70 kvp at 10 ma.

Progress Is Our Most Important Product

GENERAL ELECTRIC

AMERICAN DENTAL ASSOCIATION 100 YEARS 1859 · 1959

FOR OFFICE USE

FOR HOME USE

ASTRING-O-SOL®

- **mildly astringent**... stimulating to tissues
- **cleansing**... flushes away debris, mucus, cuts ropy saliva — pre- and postoperatively
- **refreshing, nonmedicinal flavor**... appreciated by patients
- **deodorizing**... combats offensive mouth odors
- **concentrated, economical**... use just a few drops in water

SEND FOR SAMPLES

AMERICAN FERMENT CO., INC.
1450 Broadway, New York 18, N. Y.

Accepted COUNCIL ON DENTAL THERAPEUTICS AMERICAN DENTAL ASSOCIATION

helps your patients to master their new dentures
(only N. F. Gums used)

KLING®
Dental Plate Adhesive

for the **catabolic reaction** *in stress procedures*

Stresscaps®

STRESS FORMULA VITAMINS LEDERLE

for an uneventful postdental course

Exodontia, pulp capping, oral surgery or any extensive dental procedure places abnormal demands on metabolic processes of the body... producing rapid depletion of water-soluble vitamins. The potent formula of STRESSCAPS balances normal physiologic requirements and increased oral tissue needs...to accelerate recovery at the traumatized site and prevent pathologic changes in nutritional status.

Each capsule contains:

Thiamine Mononitrate (B_1)	10 mg.
Riboflavin (B_2)	10 mg.
Niacinamide	100 mg.
Ascorbic Acid (C)	300 mg.
Pyridoxine HCl (B_6)	2 mg.
Vitamin B_{12}	4 mcgm.
Folic Acid	1.5 mg.
Calcium Pantothenate	20 mg.
Vitamin K (Menadione)	2 mg.

Average dose:
1-2 capsules daily.

Lederle LEDERLE LABORATORIES, a Division of AMERICAN CYANAMID COMPANY, Pearl River, New York

ash

ELASTIC IMPRESSION MATERIAL

for all exact impression taking

PARTIAL
EDENTULOUS
ORTHODONTIC
INLAY

YOUR SPECIAL INTRODUCTORY OFFER:

The famous Thermo Serv insulated Beverage Server is yours FREE when you order 8 tins of Ash Elastic Impression Material at our regular quantity rate of $29.95. Each tin contains enough material for 20 large impressions. This handsome server is a valuable gift and an attractive addition to office or home.

See your dealer or order direct, sending us your dealer's name.

FELLOWSHIP ALLOY

WORLD'S FAVORITE ALLOY FOR OVER 50 YEARS

Minimum contraction and expansion. 69% silver content. Takes high, brilliant polish. Certified to comply with ADA specification 1.

MOYCO WAXES

Made of the finest materials in the world's most modern wax factory. • Beauty Pink base plate wax • Regular Base wax • Bite wax • Green Boxing wax • Black Boxing wax • Pink Casting wax • Counter wax • Set-Up wax • Sticky wax • Utility wax • Inlay wax (in cones, blue or green; in sticks, green or neutral) and many others.

USE MOYCO PRODUCTS

WHEN NOTHING LESS THAN THE BEST WILL DO

MOYCO IMPRESSION POWDER

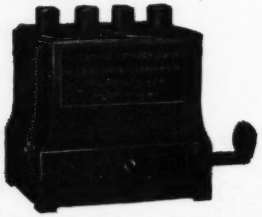
(Alginate Type)

For a perfect recovery every time eliminate the remaking of impressions with this accurate pleasant-tasting impression powder.

Conveniently packed in air-tight sealed 1 pound cans.

MERCURY & ALLOY PROPORTIONER

Lasts a lifetime



Just press the finger and the correct amount of Mercury and Alloy drops into your mixer or mortar.

FREE . . . two $2.75 bottles of Fellowship Alloy with one $14.00 Proportioner. A $19.00 value for Only $14.00.

NEW Dry or Wet WATERPROOF PLASTIC DISCS

Sizes
5/8" 3/4" & 7/8"

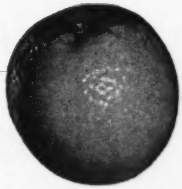
Thinner than paper—but *stronger*. Will bend but will not deform. Can be used under water. Won't clog. Will not warp under any conditions.

THE J. BIRD MOYER CO., INC.

117-21 North Fifth Street

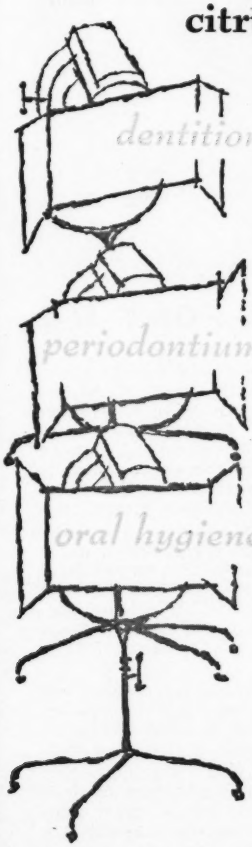
Philadelphia 6, Pa.

Over 60 years of dedication to the dental profession



for your dietary advice to patients...

citrus sidelights on oral health



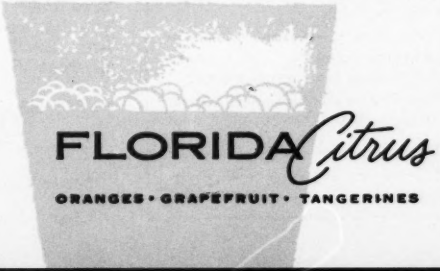
For formation of sound tooth structures, proper diet (including vitamin C-rich sources such as citrus) is essential in the prenatal period and later until the permanent dentition is completed.[1]

Liberal citrus intake daily provides vitamin C necessary for capillary and connective tissue integrity throughout the body including the periodontium.[2,3]

The detergent action of citrus fruits eaten at the end of meals promotes oral hygiene since during mastication they "literally sweep over the teeth, between the teeth, and over all the soft tissues."[3]

Florida Citrus Commission
Lakeland, Florida

1. King, C. G.: J. Am. Diet. A. 30:13, 1954.
2. Kelsten, L. B.: J. Dent. Med. 10:67, 1955.
3. Amer. Dent. Assoc.: Diet and Dental Health, Chicago, 1955, pp. 7-8.

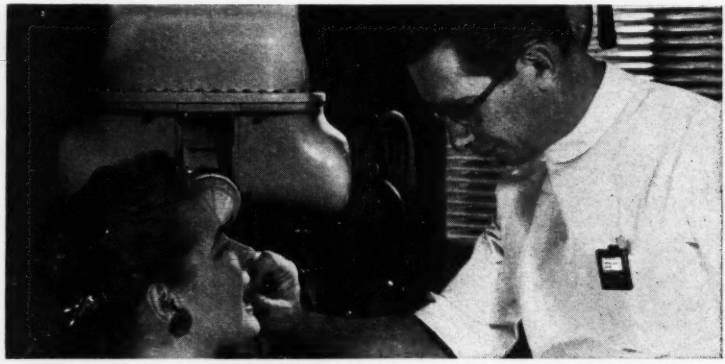


DU PONT

DENTAL X-RAY NEWS

NO. 18

Better Things for Better Living . . . *through Chemistry*



FEWER RETAKES WITH DU PONT D-1

HOW TO AVOID POOR RADIOGRAPHS IN COLD WEATHER

Here are some of the common troubles that crop up on cold weather processing and some simple ways to avoid them.

Static electricity is more easily generated when the humidity is low. Be sure that all metal benches or table tops are grounded to prevent sparks.

Processing films in cold solutions will not give them enough contrast for good, clear radiographs. Check solution temperatures carefully . . . try to keep them at a constant 68° F.

Drying films can be a problem in dry air! Low humidity tends to make the film curl or become brittle after drying. A relative humidity of 20-40% is the best for fast, safe drying.

For a complete guide to better processing in your darkroom, send the coupon below.

Du Pont Company OH-2
2432-A Nemours Bldg., Wilmington, Del.

Please send me your free booklet, "Guide for Dental X-ray Darkrooms."

Name_____

Address_____

City_____ State_____

The wide exposure and processing latitude of Du Pont D-1 Dental X-ray Film help you produce consistently better radiographs. Even if an error is made in exposure or development, you have a better chance of getting diagnostically useful results when you use D-1. Naturally this means fewer retakes, less time spent.

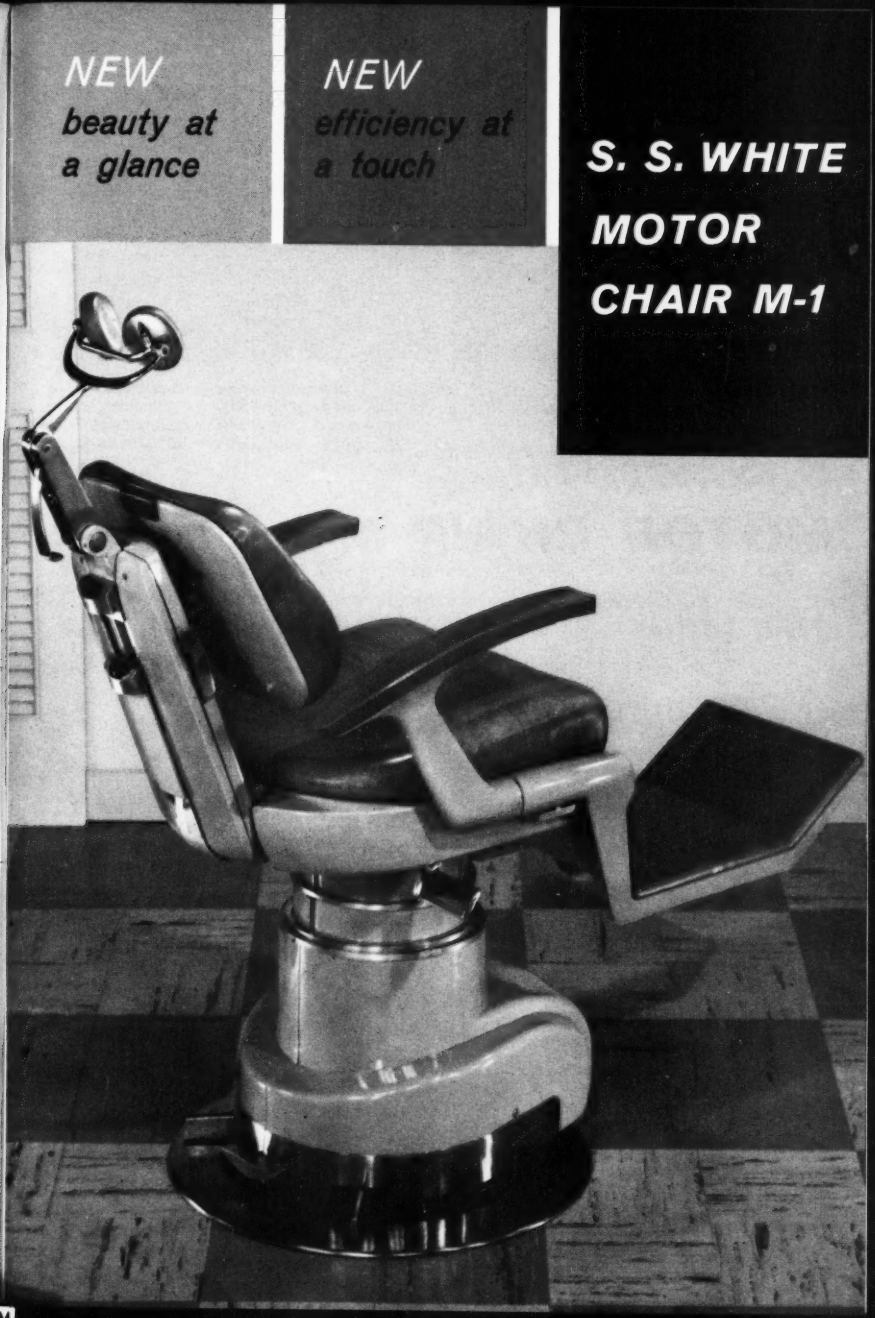
Du Pont makes dental x-ray films for all speed ranges: "S" film for fine detail and wide latitude, "D" film for speed and versatility, and "L-F" film for split-second exposures. All Du Pont dental x-ray films come in the handy "Pull-A-Tab" packet.

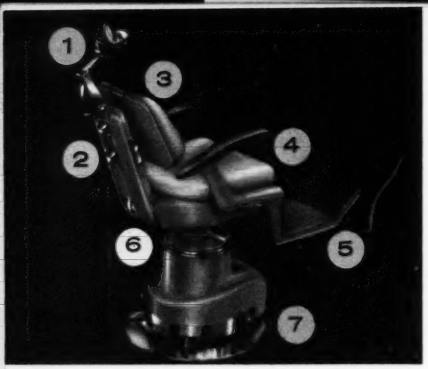
For best processing results, use Du Pont chemicals—they are recommended for use in all dental darkrooms.

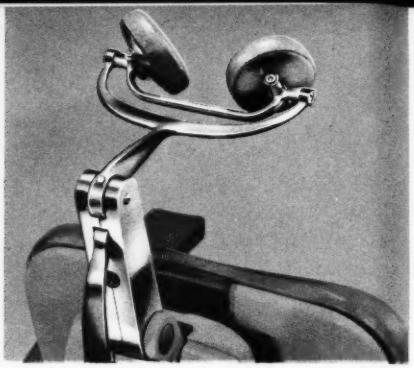
Specify Du Pont dental x-ray films and chemicals when you place your next order. Ask your dealer to show you our complete line of dental products . . . he'll be glad to recommend a Du Pont film for your special needs.

DU PONT

Better Things for Better Living
. . . through Chemistry

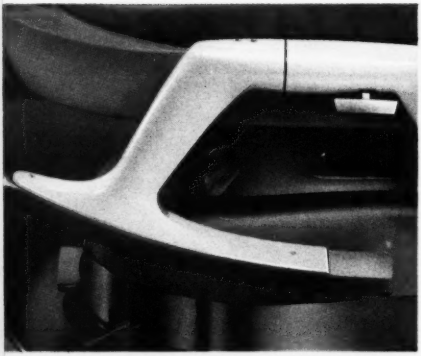

NEW
beauty at
a glance
NEW
efficiency at
a touch
S. S. WHITE
MOTOR
CHAIR M-1



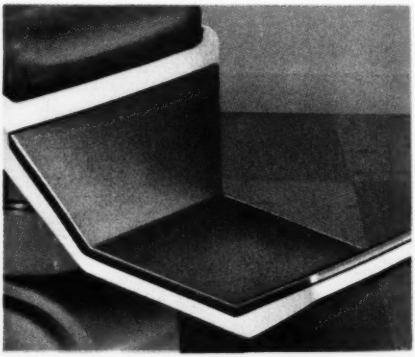


1. Headrest cradles any head comfortably. Clamp streamlined for opening, closing without finger-pinching. Light pressure releases slide lock for adjustment.

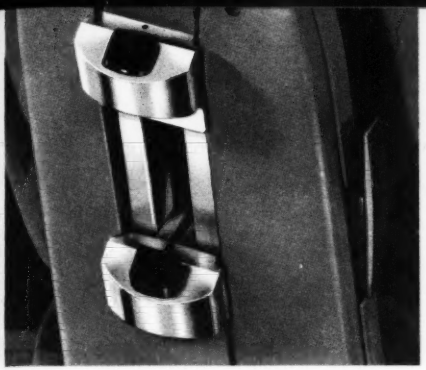
S. S. WHITE MOTOR CHAIR M-1 *puts new efficiency at your fingertips with these superior design features.*



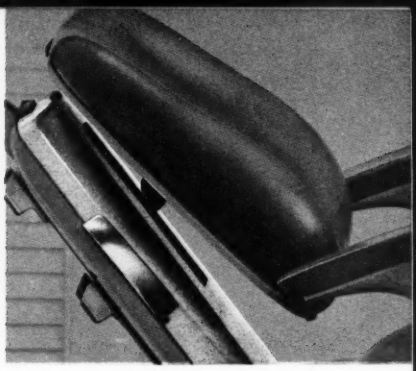
4. Fingertip release permits arm to rotate laterally to full drop position. Long, wide armrests are absolutely secure when locked in any position.



5. Contoured floor covering is of steel and durable vinyl. Its supporting frame is a single aluminum die casting integral with the seat frame for rigidity.



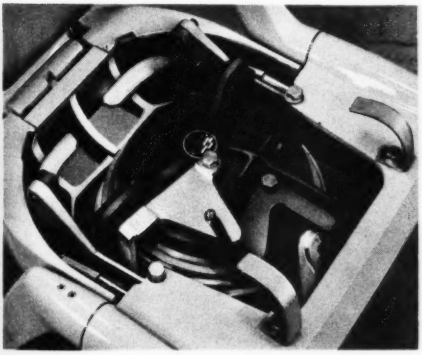
2. Push-button lock prevents up and down movement of positioned sliding back. Thumb pressure releases slide for adjustment. Fine adjustments made effortlessly due to compensating springs.



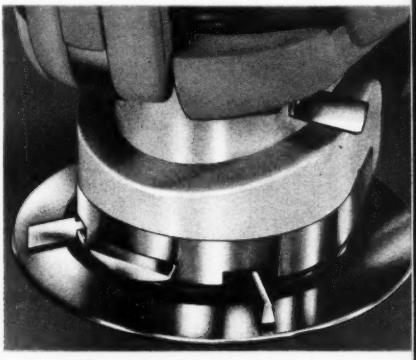
3. Roomy, self-adjusting seat back is comfortable at any rocking back position. Angle adjustment made easy by compensating springs concealed in seat frame. Positive locking in any position.

Here is no mere superficially improved version of yesterday's dental chair. Superbly styled by world renowned designer Henry Dreyfus, Motor Chair M-1 is a brand new concept – a combination of clean-lined simplicity, color, beauty and utility that obsoletes all previous standards. Every detail illustrated here was planned by S. S. White with your greater convenience in mind. Even installing the chair in your office takes only about an hour after delivery. Your dealer will gladly give you a showroom demonstration of Motor Chair M-1 – dentistry's finest from headrest to footboard.

THE S. S. WHITE DENTAL MFG. CO. Philadelphia 5, Pa.



6. Seat removable for easy service access. Motor is rubber cushioned for quiet, vibration-free running. Illustration shows how compensating springs for rocking back adjustment are concealed in seat frame.



7. Foot levers on both sides of base for raising and lowering. Pedal at rear permits positioning of chair and locks it at any position in a 60° arc. Base covers removable for easy access to mechanism.

S. S. WHITE
MOTOR CHAIR M-1

designed to work with you from any standpoint

- Controls on either side raise or lower the chair on telescoping slides with roller bearings.
- Tilts to horizontal position with effortless ease.
- Chair rides on roller bearings. When unlocked, can be rotated with slight finger pressure.
- Backrest, headrest and arms adjust readily to seat the smallest child or any adult comfortably, safely.
- Seat is of faultlessly upholstered, top quality leather and foam rubber on anatomically contoured steel form.
- Aluminum die castings are used extensively for strength and lasting serviceability.
- Exposed satin-finish chrome parts are easy to clean.
- Available in colors to match your equipment — or in two tone effects achieved by contrasting upholstery and chair-frame colors.
- Ask your dealer for a demonstration of the ultra-modern S. S. White Motor Chair M-1.

THE S.S.WHITE DENTAL MFG. CO. • Philadelphia 5, Pa.

4160

Printed in U.S.A.

Do a month's billing in one morning with a "Thermo-Fax" Copying Machine

Here's the simplest, fastest, least expensive billing system of all. Your secretary or nurse just uses the "Thermo-Fax" Copying Machine as a billing machine. With it she makes exact copies of your up-to-date ledger cards—mails the copies to patients as statements. Your patients get a complete, accurate statement that encourages prompt payment.

The "Thermo-Fax" Copying Machine is completely electric, completely clean. Makes dry copies in just 4 seconds! For a free demonstration phone your local "Thermo-Fax" Copying Products dealer. Or mail the coupon.

MINNESOTA MINING AND MANUFACTURING COMPANY

...WHERE RESEARCH IS THE KEY TO TOMORROW

3M COMPANY

Thermo-fax COPYING PRODUCTS

THE TERM "THERMO-FAX" IS A REGISTERED TRADEMARK OF MINNESOTA MINING AND MANUFACTURING COMPANY.

Minnesota Mining and Manufacturing Company
Dept. QJ-29, St. Paul 6, Minnesota

Name_____

Address_____

City_____ Zone____ State_____

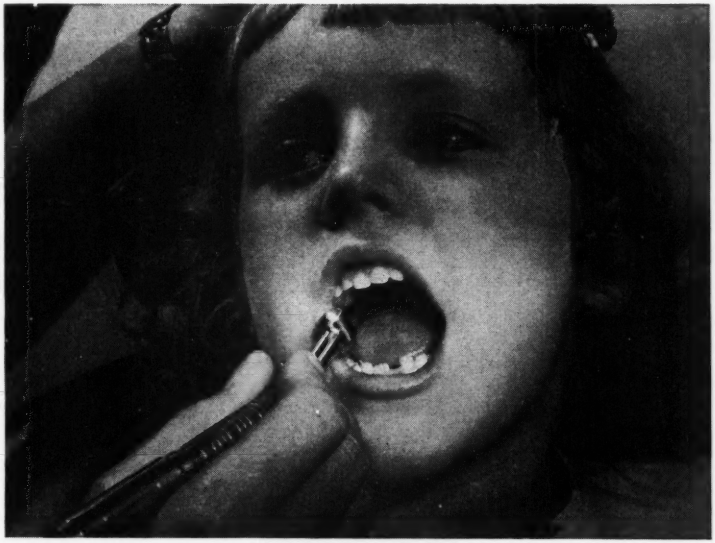
improved **EZO** dental cushions **help** denture wearers past that all-important breaking-in period

Softer more pliable Ezo dental cushions help relieve pain and pressure spots . . . permit impact on soft, tender gums. They give denture wearers a "psychological lift" during the breaking-in period. Ezo dental cushions are available at all drug stores.

FREE!

. . . send for professional samples of "uppers" and "lowers" today.

EZO PRODUCTS COMPANY • 5219 CHESTNUT ST., PHILA. 39, PA.

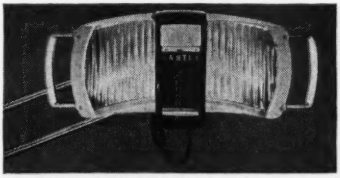


The faster the speed . . .

the better light you need!

High-Speed Dentistry and Castle's PANOVISION Light go together!

New, faster speeds have created new needs in dental lighting . . . new techniques require quicker perception of the work done and to be done.



PANOVISION for high-intensity color-corrected light from any and every angle.

Proper lighting therefore becomes more vital than ever before.

Castle's PANOVISION Light helps solve any high-speed need. It gives acute vision in the critical area by flooding the actual cavity with direct illumination. Can be raised, lowered, or angled at the slightest touch! It's a "must" for your high-speed work.

Use it with the restful General Vision Light for correct overall room illumination. Ask your dealer about Castle's matched lighting team or write for free copy of "Vision in Dentistry."

Castle LIGHTS & STERILIZERS

WILMOT CASTLE COMPANY • 1843S East Henrietta Rd., Rochester, N.Y.

NOW...YOUR PATIENTS CAN...

EAT ANYTHING!

ORA-FIX holds dentures fast—all day!

FREE SAMPLES. You know the dentures your patients receive are as perfect as science and skill can make them. Yet their ultimate effectiveness may depend on the denture adhesive your patients use. That's why we would like you to have free samples of ORA-FIX. After investigating ORA-FIX, we think you will find it the ideal adhesive for your patients to use with their dentures. So why not clip and mail this coupon today?

Ora Denture Cleanser, too

BETTER... by McKESSON

McKESSON LABORATORIES
Box 548
Bridgeport 1, Connecticut Dept. OH

Please send me free samples of ORA-FIX denture adhesive.

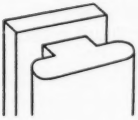
Name _____

Address _____

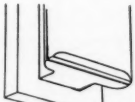
City _____ **State** _____

How the STERN G/A Attachment helps you produce successful Precision Attachment restorations

• Wrap-around reinforcement on female provides extra strength at points of greatest stress . . . prevents distortion . . . eliminates need for frequent adjustments.



• Occlusal extension on male permits easy, precise welding of male to saddle . . . simplifies ordinary soldering too.

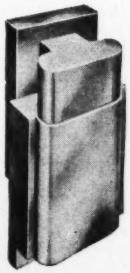


• Gingival adjustment slot provides "bulldog-grip" retention . . . is easily adjusted, regardless of case design . . . is far less subject to breakage.

• Reinforced female fits the same abutment preparation as conventional Attachment females.

Remove the "Attachment problem" from your next restoration . . .

prescribe **STERN G/A** *Attachments*



STERN Technical Department 320 WASHINGTON STREET • MT. VERNON, N. Y. OH 2

Please send me —

- ☐ Technical literature on the STERN G/A Precision Attachment
- ☐ STERN G/A Precision Attachments
- ☐ New Technical Bulletin, "Assembling Attachment to Muco-static Bases on the Model."

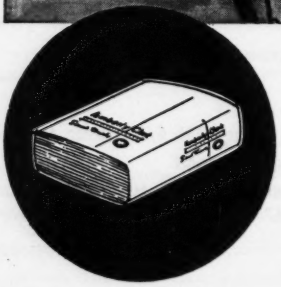
Dr. .....

Address .....

.....

Now Sanek towels are bigger than ever

More absorbent, too. Disposable Sanek towels remain soft and strong even though they absorb up to 7½ times their normal weight. Use as a bib, tray cover, cleaning instruments—you'll eliminate linen and laundry costs! Sanek towels make cloth towels obsolete, but cost less than 1¼¢ each. In glare-reducing green.



Kimberly-Clark
SERVICE PRODUCTS

Kimberly-Clark Corporation, Neenah, Wisconsin

SANEK is a registered trademark of KIMBERLY-CLARK CORPORATION

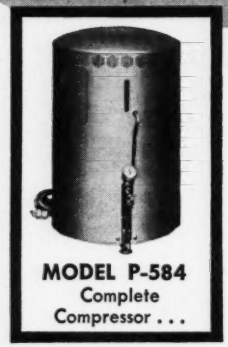
Dependable Pain Relief

now...

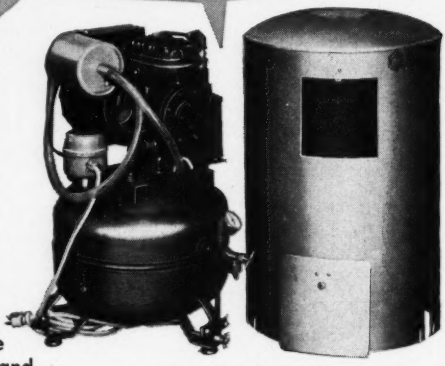
the new McKesson Compressor

that delivers

4 cubic feet of air *per minute!*



MODEL P-584
Complete
Compressor . . .



housing this entire motor-pump unit and air-receiver . . .

and sheathed with this green tinted Hammer-finish Cover!

Yes, this new McKesson P-584 *delivers twice as much air* as Model 581 which recently scored such great success!

Also, when specified, it furnishes pressures up to 100 pounds!*

Why did we design and build this P-584? Because the whole trend in modern dentistry is for MORE AIR. High-speed handpieces, new dental clinics, etc., are typical reasons for this.

Here . . . in the McKesson P-584 . . . is the Compressor which *dares* you to want more air than it will deliver.

Like the 581, it's super-quiet and compact, too—requires only 16"-square floor-space.

*Available whenever customers need such pressures for certain handpieces, etc.

McKesson

TWIN-CYLINDER COMPRESSORS

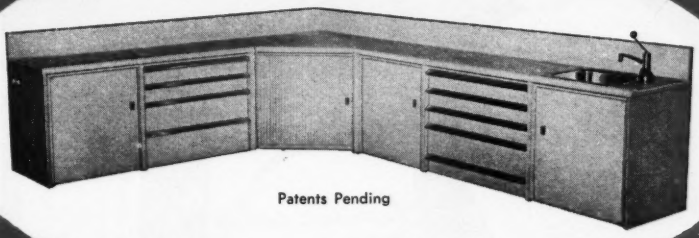
for other exclusive features, full information and prices . . . contact your McKesson Dealer! Or Write us for P584 Brochure

McKESSON APPLIANCE COMPANY • TOLEDO 10, OHIO

Wonderful

NEW IDEA

in dental cabinets



Patents Pending

The original and finest modular wall-mounted cabinets by Shelley. Modern, "built-in" convenience at a sensible price.

NEW "BUILT-IN" BEAUTY
Gives any dental office a new, modern efficient look. Trim, functional lines. Quick, easy to install.

NEW CONVENIENCE
Provides a practical place for everything. Working surface is adjustable to convenient height.

NEW CUSTOM FITTINGS
Optional equipment includes built-in stainless-steel sink and single-lever faucet, chrome waste receptacle with automatic pop-up lid, double electrical outlet, 6 stainless steel trays, 20 glass trays, 12 medicament bottles. Available in any combination of sections with a continuous top. Drawers are 5 trays wide—25% more space.

ALL-FORMICA
Formica laminated throughout in woodgrain colors to match units and chairs: BLUE, CORAL, GREEN, BLOND.

Ask your dealer about the new Shelley Wall-Mounted Cabinets or send coupon for full details.

Shelley

Leader in Advanced Design

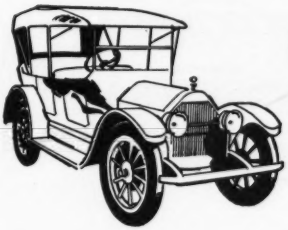
Shelley Professional Products, Inc. **Dept. O**
305 Glendale Blvd., Los Angeles 26, Calif.
Send info. on: ☐ Wall-Mounted Cabinets, ☐ Mobile Cabinets.

Doctor.....

Address.....

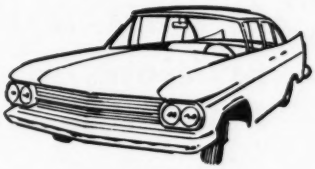
City.....**Zone**.....**State**.....

THIS



OR

THIS



You wouldn't depend on a 1920 model car today, particularly not after seeing and driving the sleek, new 1959 models.

And it's just as true in your dental practice. Your patient wants a dentist with a 1959 practice. Professional skill is not enough. The management of your practice must keep pace with your technical dentistry. Only through professional skill AND good practice management will you be able to carry out your responsibility to give better and more service to more people.

Send for a copy of "PBP . . . What it is . . . What it does" — for your patients, your practice and YOU.

For your free copy, fill in the spaces below, tear out this page and mail TODAY

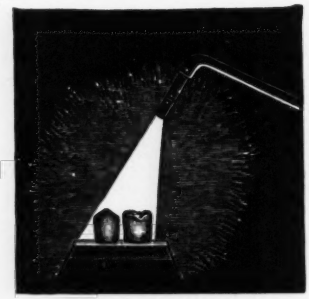
PROFESSIONAL BUDGET PLAN
Madison, Wisconsin

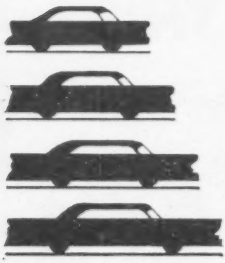
PROFESSIONAL BUDGET PLAN OH-12
303 East Wilson Street, Madison 3, Wisconsin

Dr.....

Street Address.....

City.....Zone.....State.....





MASEL believes that precious-metal crowns —like cars—should be offered in a *complete* price range

Taking a tip from car dealers who stock a fine car for each gradation of income, Masel offers dentists precious-metal crowns at four different price levels.

Of course *all* Masel precious-metal crowns are manufactured with meticulous care, to the same exacting specifications. The difference is entirely one of material.

Crowns made of platinum (most precious of crown metals) are naturally the most expensive, ranging from $5.40 to $11.15 each depending on type and size. Of course they are practically indestructible, having the strength, malleability, and toughness to withstand any degree of contouring and cuspal adjustment. Esthetically, they are, of course, the most pleasing.

Crowns of white gold, supplied in the same forms and sizes as Masel's Platinum Crowns, range in price from $2.25 to $4.95. The difference between the platinum crowns and the white gold crowns is simply the difference between the physical properties of the two metals.

Coin-colored gold crowns, recommended for long-span bridge abutments because of their greater hardness, range from $1.95 to $3.60.

Crowns of 22K Yellow Gold are our most popular and economical crown, costing from $1.85 to $3.50.

So there is a Masel precious-metal crown to fit the needs (and pocket book) of each one of your patients, and Masel—like the manufacturer of fine cars—is proud indeed of the quality which characterizes each one of the Masel Precious-Metal lines.

Don't forget that Masel sends you, free of charge, a set of Masel Time Savers in a hinged compartment box (with crown gauge) when you order 20 or more Masel crowns.

Send your card for complete information.

ISAAC MASEL CO. 1108 Spruce Street Philadelphia, Pa.

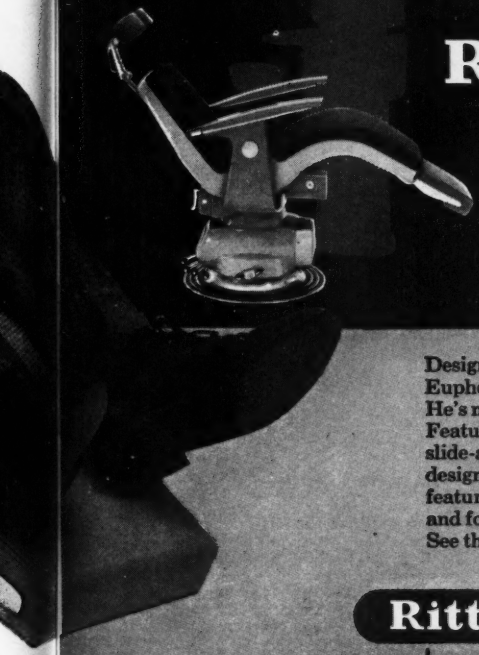
NEW!

R·E·A

V! EXCITING! and

A L·L·Y COMFORTABLE

THE ULTIMATE IN DENTAL CHAIRS...



Ritter euphorian* chair

REST CURVE

Design with purpose! The wonderful, new Ritter Euphorian Chair "cradles your patient in comfort." He's more relaxed and cooperative. Features? Touch-of-the-toe elevation *and tilt* . . . slide-away armrests . . . choice of three headrest designs . . . special pad for children . . . many other features designed for your added operational ease and for the comfort of your patients. See this magnificent chair at your dealers'!

Ritter Company Inc.

MAIL COUPON NOW FOR FULL-COLOR CATALOG!

SEE THIS CHAIR AT THE CHICAGO DENTAL SOCIETY MEETING
Booths 1 thru 5 and 47 thru 50

*(Pronounced U-FOR-IAN)—from the Greek, meaning "state of well-being."

RITTER COMPANY INC.
1950 Ritter Park, Rochester 3, N. Y.

Please send me full-color catalog on the new Ritter Euphorian Chair.

Name.....

Address.....

City..... State.....

An attractive young mother stays attractive

This denture patient has completely fooled nearly every dentist and layman who has seen this illustration in full color.

Your patients will experience the same surprise and relief when they are shown the before and after portraits of this patient, only one of many case histories in the Trubyte Slide Library. Full color 35 mm. slides and 8" x 10" color prints are available.

Write for your copy of the Trubyte Slide Library Catalog, Dept. A, The Dentists' Supply Company of N. Y., York, Pennsylvania.

VOL. 49, NO. 2 **Oral Hygiene** FEBRUARY 1959

BPA REGISTERED IN U. S. PATENT OFFICE NBP

Total circulation more than 90,000 copies monthly.

DEPARTMENTS

EDITOR
EDWARD J. RYAN
BS, DDS

ASSOCIATE EDITOR
MARCELLA HURLEY
BA

EDITORIAL OFFICE: 708 Church Street, Evanston, Ill.; PUBLICATION OFFICE: 1005 Liberty Avenue, Pittsburgh 22, Pa.; Merwin B. Massol, Publisher; Robert C. Ketterer, Vice President; Dorothy S. Sterling, Promotion Manager; Homer E. Sterling, Art; John F. Massol, Assistant to Vice President. NEW YORK: 7 East 42nd Street; William S. Eltinge, Eastern Manager. CHICAGO: 224 South Michigan; John J. Downes, Western Manager. ST. LOUIS: 1044 Syndicate Trust Building; Carl Schulenburg, Southern Manager. LOS ANGELES: 1709 West 8th Street; Don Harway, Pacific Coast Manager. Publishers of Spanish Oral Hygiene, Dental Digest, and Proofs, The Dental Trade Journal. Member of Business Publications Audit of Circulation, Inc. and National Business Publications, Inc. Printed in U.S.A. Oral Hygiene's subscription price is $5.00 per year in the U. S., Canada and Latin America; $5.75 elsewhere.

calls for high speed anesthesia with

unacaine HCl 3.8%

(METABUTETHAMINE HYDROCHLORIDE)

WITH EPINEPHRINE 1:60,000

For longer duration of anesthesia — in oral surgery or endodontic work — the local anesthetic of choice is —

PRIMACAINE HCl

a Brand of

METABUTOXYCAINE HCl
(with epinephrine 1:60,000)

PRIMACAINE HCl (with epinephrine 1:60,000) produces fast, deep anesthesia plus extra duration and unusual tissue tolerance.

The potency, rapid diffusibility and fast anesthetic action of UNACAINE HCl are suited to high speed and routine operative procedures.

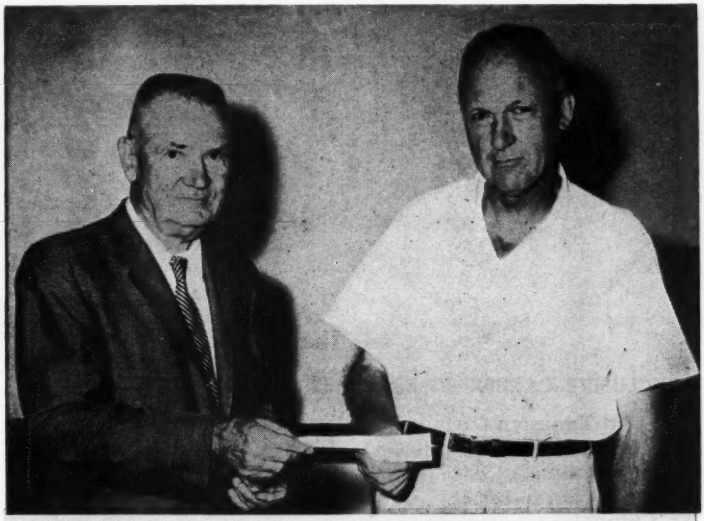
You'll find, too, that there will be no complaints of all day numbness when UNACAINE HCl is used! Duration of anesthesia is ideal for most operative procedures—about 1 hour. Shortly after the patient leaves the office, anesthetic symptoms are gone.

We urge you to try UNACAINE HCl in your practice—and compare.

Novocol

CHEMICAL MFG. CO., INC.
BROOKLYN 7, NEW YORK
TORONTO 5, CANADA

Picture of the Month



DOCTOR N. G. Slaughter, left, of Athens, Georgia, a former President of the Georgia Dental Association and a member of the American Dental Association since 1905, is shown presenting his 600th monthly check for rent to Roy Scoggins, Secretary of the Southern Mutual Insurance Company, the owner of the Southern Mutual Building.—*Photograph submitted by Mrs. Fain Slaughter, Jr, Athens, Georgia.*

Ten dollars will be paid for the picture submitted and used in this department each month. Send glossy prints with return postage to ORAL HYGIENE, 708 *Church Street, Evanston, Illinois.*

Big BUR BONUS!

36 Carbex FRICTION GRIP Burs . . .
Specially Designed for
Ultra Speed Cutting . . .
$66.00 Value! . . .
plus FREE Custom Designed
Bur Block and Case

all for only $54.40

EXCLUSIVE CARBEX FG FEATURES . . .

- Solid Tungsten Carbide—Rigid—Minimum Vibration!
- Eight Flutes—Faster Cutting!
- Straight Flutes—Self Cleansing!
- Designed Specifically for Ultra Speed Cutting!

These Exclusive Features Produce SMOOTHER CAVITY WALLS

This Big Bur Bonus gives you 36 Carbex FG Burs for **$11.60 LESS than the unit bur price . . .** and Specially moulded Bur Block that fits into its Matching Case . . . provides protective Bur Storage Compartment with clear-view cover!

You get these popular burs— 6-#557, #700; 4-#558, #701; 3-#2, #35, #57, #171; 2-#4, #37 **PLUS Bur Block and Case for $54.40**

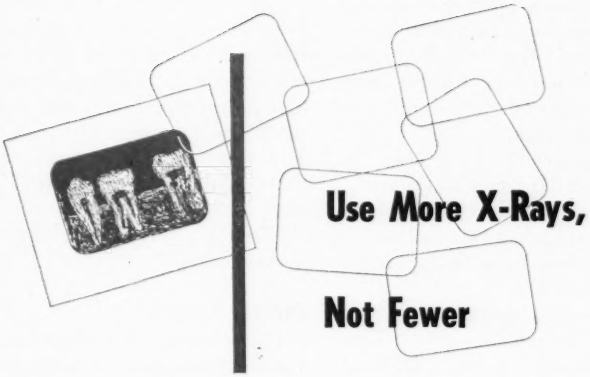
KERR

Limited Time Only—See Your Dealer

FRICTION GRIP CARBEX BURS

KERR MANUFACTURING COMPANY *Established 1891* **DETROIT 8, MICHIGAN**

XUM



Use More X-Rays, Not Fewer

BY HAROLD S. JONES, DDS

Six-month dental examinations must be supplemented by a study of x-rays.

IT IS only a tooth, but what a contrite situation it has produced in my mind.

By going to the extreme of confessing that I am responsible for this tooth, and attempting to have this fact published, I sincerely hope that others will learn from my experience, and I will console myself in a small way.

It was a first molar in a child 13 years old, who has come regularly and given me all the opportunity I needed to preserve her teeth. I placed restorations in three of her first molars and several bicuspids over the last five years.

The other day she presented herself for her regular checkup, and I found a small distal cavity on the first molar. Under an anesthetic I found to my surprise that the pulp was involved. Needless to say, it was a large cavity. She remarked on questioning, that the tooth had been sensitive.

Why didn't I take bite-wing x-ray pictures long before this date?

Why didn't I suspect that, if three of her first molars needed attention, the other one would most likely have some hidden imperfection?

Why did I assume that my careful examinations every six months were better or as good as x-ray studies?

I am conservative, and abhor

x-ray duplication. I have hundreds of patients who, I proudly feel, have had many teeth restored, and not one has had a pulp involvment, let alone an extraction. I have often said, give me the children early and often enough, and I will preserve their teeth.

I take bitewing x-rays rather regularly, and have done so for years; but with this child I assumed too much. I will admit that such action is not in keeping with the virtues of our profession.

I was saved from total embarrassment by the child's parents. They had confidence in my judgment, and they thought the calamity was an inevitable affair. I thought for a time that my inconsistency was exposed, that their confidence in me would be shaken, and that my reputation was at stake. The parents' acceptance of this incident helped greatly to relieve me mentally, but the truth of my negligence was still before me.

I hope the root canal treatment I am executing on this tooth will be a success, and then my guilt will be partly lessened.

Incomplete Examination

Here is another story along this line that is hard to believe, especially for anyone outside our profession.

"I have a toothache, doctor. I hope I don't have to lose the tooth. And would you examine the others," the patient began his episode.

"Well, you certainly have beautiful teeth," I remarked.

"Yes, that's what they all say. Three years ago when I had a tooth extracted I asked the dentist to examine my teeth, and he said there were no cavities. A year later I lost another tooth, and at that time the dentist said there were no cavities, and now the story is repeating itself."

"Well, sir, you must have x-ray pictures taken."

Cavities Detected

The bitewings showed many cavities on these beautiful teeth, high and interproximally. I will not tell you much about the tediousness of cutting those beautiful teeth across the occlusal surface and down both mesially and distally to make a good restoration—but we did it.

Many a patient gets a shock when you report the findings on good x-ray pictures. That is to be expected, for someone else failed to do a careful examination before this time. We know that the average dental caries can be seen on an x-ray picture two years before there is any clinical evidence of it. These cases have taught me this lesson: Do not be too conservative, do not assume too much. From here on, I shall take all the x-rays that I consider to be necessary for an accurate diagnosis.

1121 *Walnut Street*
Allentown, Pennsylvania

WORRY-FREE INVESTMENTS for the DENTIST

BY JOSEPH ARKIN, CPA

A discussion of some of the advantages of investing your money in a mutual fund.

THE SUCCESSFUL dentist faces the problem of prudently investing surplus funds to furnish capital and income for his old age. Can a busy practitioner find the time to seek, manage, and supervise his investments? All too often the answer is *no*; thus more and more persons, particularly professional men, find that the answer is in investing in mutual fund shares.

Basically, a mutual fund is the cooperative ownership of shares in many companies, in many industries, with diversification and lessening of risk. Spreading investment ownership among many securities is a time-tested investment principle to reduce risk and to increase the possibilities for worthwhile investment results.

Listed are some of the highlights of the advantages of investing in mutual fund shares:

Trained Supervision: The stocks that are purchased by the management of a mutual fund are carefully chosen and information about these companies is continuously

checked. Trained men make up these advisory groups, men who understand how to interpret up-to-date economic and statistical information, and who make trips throughout the country inspecting the companies and talking to the executives of these companies.

Dividend Continuity: Because the income of a mutual fund comes from many individual securities, continuity of dividend payments rests on a stronger base than if the income were derived from one or only a few securities. The dividends paid to shareholders are not guaranteed, but vary from year to year, depending on the amount earned by the fund.

Marketability: Mutual fund shares enjoy a ready market, whether holdings be in large or small amounts. Under normal circumstances the fund will redeem your shares for cash at a price based on the market value of its investments at the time of the transaction, in accordance with provisions set forth in its prospectus.

Convenience: You do not have to worry about the safekeeping of your share holdings or about bookkeeping details. An independent bank or trust company holds all securities in custody. Regular reports are furnished to stockholders setting forth pertinent financial information, dividend news, and recent sales or acquisitions of various securities.

Simplified Estate Settlement: Ownership of mutual fund shares simplifies the settlement of estates, due to the ease of valuation and liquidation. It also reduces the number of transfer agents to be dealt with and the number of different requirements to be met. But more important, provision is made for continuing investment supervision, even during the settlement of the estate, and thereafter for the investor's spouse and children if they elect to retain the shares.

The needs and purposes of investors are varied. There is also a wide variety of purposes and policies among mutual funds, each offering many advantages and benefits under principles of operation generally common to all.

Investment objectives of management of each mutual fund determines the types of securities it owns and the degree of risk inherent in ownership of shares. The investment holdings of some funds consist entirely of common stocks; of others, bonds. Still other funds own both. But, each holding is carefully selected for its ability to contribute to a specific investment result or a combination of results.

Mutual funds have grown spectacularly in the past few decades. At the end of 1940 their total assets were only 448 million dollars, with 296,000 shareholders. At the end of 1956 they totaled almost 10 billion, with approximately 3,000,000 shareholders. Economists predict that they will have total assets of 20 billion and more than four

million shareholder accounts by the end of 1960.

Actually, mutual fund ownership is no longer confined to the small investor for whom they were originally designed. Some individuals have invested hundreds of thousands of dollars in them and they have become increasingly popular as investments for banks, insurance companies, schools, colleges, hospitals, fraternal organizations, pension funds, profit-sharing plans, corporations and partnerships.

Their record has been impressive. They have shown remarkable long-term growth and none has ever missed a dividend. Admittedly, the past is no guarantee of future accomplishment, but it is still our only laboratory for measuring the effectiveness of management methods and principles.

The diminishing value of the dollar makes mutual funds a particularly attractive investment in these times. Dollars in the bank or in insurance are fixed dollars, which have been losing and are continuing to lose their purchasing power as the cost of living repeatedly reaches a new peak.

There are various methods of investing in mutual funds, the most popular methods being the periodic payment plan, whereby the investor agrees to pay a fixed sum each month for a ten-year period; the voluntary plan, whereby the investor pays a fixed sum each month but is not under contractual obligation to do so; and the outright purchase of a fixed number of shares for its cash value, or the investment of a fixed sum of cash for whatever amount of shares such cash will buy at the asset value.

When the decision is made to invest in mutual funds, (and such a decision is a wise one!) one more important decision has to be made, and that is the objective sought of the fund. Before making a purchase or contract commitment, the investor should investigate thoroughly—making sure that he finds a mutual fund adapted to his wishes and needs.

The proper step in such direction would be the selection of a reputable investment firm, registered both with the Securities and Exchange Commission and the National Association of Security Dealers, to discuss your investment aims.

DANGER OF PREMATURE LOSS

I BELIEVE that impacted teeth should be removed only when there is an exceptionally good reason for doing so:

1. When they are causing pain and discomfort.

2. When there is roentogenogramic evidence of infection caused by them.

3. When they are causing malocclusion.—MARION JOY. *Toronto, Ontario, Oral Health*

Last Minute Pointers For Your 1958 Income Tax Return

BY ALLAN J. PARKER, LLB, LLM*

WHEN a few years ago Congress changed the due date for Federal income tax returns from March 15 to April 15, columnists lost their opportunity to "beware of the Ides of March." Whether in March or April, paying taxes is never an exhilarating pleasure but a necessary duty of citizenship. And the Supreme Court has frequently remarked that no one has a duty to pay more taxes than the law requires. This article may offer some last-minute hints to the dentist who is about to settle his score with the government.

Actually, as has been pointed out, the time to plan for tax savings is all during the year. After the whistle has blown the end of the year there is no further effective action that you can take for 1958. So resolve now to apply any of the items which seem useful to you in 1959—after talking with your accountant or attorney. Remember, your family lives on what is left after taxes, and a dollar of tax savings may be worth three dollars in fees.

*Mr. Parker is a member of the New York Bar.

Depreciation

Congress has given the deduction for depreciation additional attractiveness, beginning with 1958. A new, extra first year depreciation of 20 per cent is allowed on purchases up to $10,000 a year ($20,000 if joint returns are filed) of tangible, personal business equipment (not land or buildings). This is in addition to regular de-

New regulations and little-known provisions of income tax law can give dentists a tax advantage.

preciation and disregarding salvage value.

Either used or new property is eligible for the extra 20 per cent first year depreciation deduction, provided it has a useful life of six or more years. For example, in September 1958, Doctor Brown purchased an x-ray machine and related equipment at a cost, including installation, of $1000. Equipment of this nature is given a useful life of about ten years by the Internal Revenue Service. Even though Doctor Brown held the property for only one-third of the year, his depreciation deduction is computed as follows:

Original Cost	$1000
Extra Depreciation	200
Remaining Basis	$ 800

Then using sum-of-the-years-digits depreciation on the balance and assuming salvage value of $50,

22% x $750	=	$ 165
⅓ x 165	=	55
Total allowable depreciation for 1958. $200+$55	=	$ 255

There are some limitations on this additional depreciation deduction, which should be checked with your attorney or accountant. For example, the property must be *purchased* (not exchanged or inherited) after 1957 from a person who is not a member of your immediate family. Also, this provision is elective. If a taxpayer prefers to spread depreciation over a longer period, he may do so. Doctor Jones, who in 1958 borrowed money to equip his own new office, prefers to postpone depreciation deductions to what he hopes will be higher income years in the future.

Office at Home

If your office is in your home, depreciation deductions are allowable on that portion of the home used for professional purposes. For example, Doctor Brown uses 25 per cent of his home as an office and reception room. He computes depreciation as follows:

Cost of Residence (exclusive of land)	$24,000
Portion Allowable to Professional Use— One Quarter	6,000
Depreciation at 2%	120

An office in your home, entitling you to depreciation deductions, may be a "second" office, if in fact you see a substantial number of patients at your home.

There is a particularly attractive feature about the depreciation deduction with respect to a home or office which you own. Although depreciation is allowed in order to

permit a taxpayer to recover the cost of property used in his profession over its useful life, in terms of dollars in today's inflationary times, real estate does not in fact depreciate with age. It is common for a building to be purchased in 1955 for $40,000 and sold in 1959 for $50,000 even though five years depreciation has been deducted. Thus, to an extent, depreciation is a "free" deduction.

In 1958 Congress made another slight change in depreciation of improvements and fixtures (such as air conditioning) made by a dentist who rents his office. Where the lease is renewable, and the facts show that it is quite likely to be renewed, these improvements now must be depreciated over the original and the renewal term of the lease. To an extent, this postpones depreciation deductions and consequently may be disadvantageous.

Entertainment

Do not overlook entertainment deductions in preparing your 1958 income tax return. Such deductions include not merely restaurant checks and theater tickets for entertaining referring dentists or patients, but also the additional cost of entertaining guests in your home, flowers for patients, gifts to employees, hospital attendants, nurses, and patients, for business rather than personal reasons; and an allocable portion of dues at a town or country club—again where it is clear that membership in such club has been taken out in substantial part for professional reasons. Records should be maintained showing the dates, places, and events, the names of guests, the amounts expended, and above all, some indication of what professional benefits in fact resulted or were reasonably expected to result from such entertaining. Records of this nature have been made easier to maintain by the recent expansion of credit cards which now include more types of expenditures than ever.

Contributions

Again, a dentist who itemizes his deductions may deduct contributions to his church or other charitable, educational, scientific, or similar tax-exempt organizations. Deductible contributions, however, need not be given in cash. The value of clothing or used equipment given, say, to a mission for use in Africa is deductible in an amount equal to the fair market value of the property.

Although the value of services contributed by dentists to hospitals and other charitable organizations is considerable, tax deductions are not allowed. However, the unreimbursed out-of-pocket expenses of services to a charitable organization are deductible—such as the cost of gas and oil consumed in driving your car to solicit funds for the new addition to your church. Even the cost of toll tele-

phone calls and postage incurred in connection with charitable work should not be overlooked.

Educational Expenses

The tax laws recognize that it is as much a part of a dentist's professional responsibility to keep his own skills sharp as to keep his equipment in good repair. Thus, deductions are allowed under the business expense category for the cost of professional publications, dues to state or national associations, and the expense of attending refresher courses to keep informed of current developments.

The expenses of attendance at local or national dental conventions or meetings are deductible, including hotels, transportation, and tips, but not the cost of any side trips. Moreover, the Internal Revenue Service insists upon knowing in the case of convention trips which is tail and which is dog. That is, where the purpose of the travel is primarily for a vacation, expenditures for travel, meals and lodging will be disallowed even though you attended a bona fide refresher course. Only the cost of attending the course will be deductible under such circumstances. An important factor in determining whether the primary purpose of the trip is for vacation is the relative amount of time devoted to personal sightseeing and similar activities as compared with the time devoted to educational pursuits. Almost inevitably, the expenses of your wife and children in accompanying you to such conventions are nondeductible.

Similarly, the expenses of a residency or postgraduate study in a university are considered to be capital expenditures, somewhat comparable to the construction of a factory which will subsequently produce income. The dentist, however, unlike the factory owner, may not take depreciation deductions on the cost of his education over his working life.

Pensions

The year 1958 may also go down as the one in which the Keough-Jenkins bill, designed to give tax equality to pensions for the self-employed, passed the House of Representatives but failed in the Senate on a technical point of order.

As a result, contributions which a physician, dentist, farmer, or other self-employed person, makes toward his own and his family's security in his old age in the form of annuities, life insurance, or stock investments, must remain nondeductible. But the bill's supporters will carry the fight on. Tax discrimination is as unjustifiable in 1959 as it was in 1958.

Insurance

Premiums for fire, liability and extended coverage insurance on an office or on a home, to the extent that it is partly used as an office, are deductible. Malpractice and

also business-connected workmens' compensation insurance premiums are deductible in full. Deductions are not allowed for disability insurance to the extent that it provides for continued earnings for a dentist who is disabled. However, the cost of insurance, which repays medical expenses for accident or sickness may be deducted (as a medical expense), as may the cost of special policies which take care of a professional man's office overhead while he is disabled (as a business expense).

Not everything on this check list admittedly applies to every taxpayer. For dentists, as well as other business men, there is no substitute for maintaining accurate, complete, and up-to-date records of financial transactions. Only with these, together with whatever help is necessary from your attorney or accountant, can you be sure that you are staying out of trouble by paying your fair share of taxes but no more.

120 *Broadway*
New York 5, *New York*

THE COVER

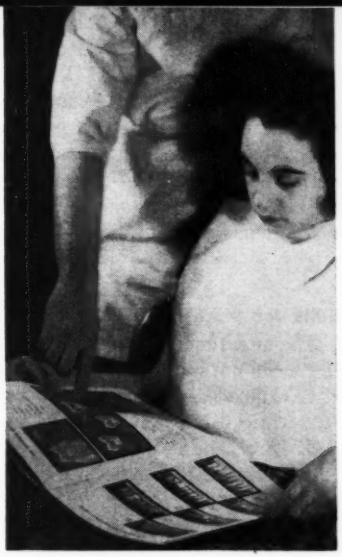
THIS month's cover photograph of the entrance of the Henry Grady Memorial Hospital in Atlanta, represents an invitation to The Thomas P. Hinman Dental Clinic, which will be held in Atlanta, Georgia, March 15 through 18. Flanking the entrance are two seven-foot figures, one of Hygeia, the Greek goddess of health, and the other of Hippocrates, the father of medicine. These figures are in relief from the black granite walls of the entrance. They are two of five sculptures designed and executed by Julian H. Harris of Atlanta, Georgia, for this building. Among other works of art designed by Mr. Harris is the Thomas P. Hinman medallion.

Requests for information about this meeting, and reservations, should be addressed to Doctor Thad Morrison, Jr, General Chairman, 353 Doctors Building, Atlanta, Georgia.—*Photograph courtesy of Atlanta Chamber of Commerce.*

NUTRITIONAL DISTURBANCES

FICKLE eating habits often dictate the older person's diet. One has to contend with edentulous, sedentary, and constipated individuals whose whims of diet are as unpredictable as those of the pregnant woman. It is small wonder that nutritional disturbances, obesity, and vitamin deficiencies contribute to the problem of providing a constant metabolic milieu for the elderly patient.—LANE and MASSEY from *Geriatrics*

Practice Administration Thought-Provokers



BY CHARLES L. LAPP, PhD, and JOHN W. BOWYER, DBA*

Patient Education

If you educate patients as to the value of your service they are less likely to shop around for dental service. If you have patients who believe your service is not worth the fee they have paid, then they feel exploited. When they hear that someone else paid less for a restoration, they begin to wonder if their dentist is "taking" them. It is good public relations to let the patient know when you have made a difficult restoration.

On the other hand, if a patient feels you are not charging enough then you are really being exploited, and you should review your fees. Remember, upon the completion of dental service, the patient should feel that the treatment is worth what he paid for it.

* * *

How to Handle Patient Objections

If a patient seems reluctant to accept your service, evaluate his resistance. Is it just an excuse? Is it a real objection? Any broad objections are difficult to handle. Reduce a broad objection down to specifics that can be handled. There are various ways for countering objections and

*Doctor Lapp is Professor of Marketing; Doctor Bowyer is Associate Professor of Finance, Washington University, St. Louis.

resistance. If it is just an excuse, ignore it. By ignoring the excuse you will not give the patient's point stature. Sometimes a smile is more effective than saying anything. Other techniques are to restate the patient's point, ask the patient a question, and agree; then turn back the point as an advantage and concede, but give plus advantages to offset the patient's point of view.

* * *

Hints for Study Club Chairmen

The next time you are a study club chairman use these hints, and see if you do not have a better meeting:

1. Control discussion, but do not dictate.
2. Keep discussion balanced among participants.
3. Direct specific questions to specific colleagues if the discussion lags.
4. Reconcile differences in points of view on a heated discussion by taking a vote.
5. Stop the meeting while it is still going good—do not let it "die out."

* * *

Short Thought-Provokers

1. When you are with a patient do you allow your mind to wander to your own harassing problems rather than making the patient your sole object of concentration?
2. Do you encourage patients to report late for appointments by not maintaining your appointment schedule?
3. Are your fees so low that you have lowered your standing as a professional man?
4. Do you look beyond a patient's mouth in order to better understand each patient?

* * *

Auxiliary Personnel React to Praise

Too often you may take your auxiliary personnel for granted. Avoid the attitude that doing a good job is their responsibility. When one of your employees does something well, helpful, or a little extra, let her know you appreciate her effort. If you do, you will be surprised how much more she will do for you.

* * *

Investigate Before You Invest

Most dentists do not have time to do their own investing unless they

do it as a hobby—something for a change of pace. However, the allure of quick profits overcomes the best of us at times, or you may feel that you can do better than professional investment management. Some dentists have. If you do your own investing in individual common stocks, these rules will help you prevent some losses.

1. Select a broker with a good reputation and one that you feel will give you adequate service. Remember all the broker has to sell is service.

2. Buy only from your broker. Do not ever buy securities from a stranger over the telephone (especially from another country).

3. Do not act on investment advice unless you know the source to be a reliable one. A good idea is to time test some of the advice before you actually use it.

4. Try to find out all you can about the company and its management before you buy, even if you feel you do not know enough about it to ask intelligent questions. Ask anyway, you will be surprised what you can learn.

5. Always remember that the days of "overnight" fortunes in the stock market are past. Do not expect miracles, because they do not happen, and beware of the man who promises them.

6. Never act on an impulse. Any time a business deal is presented to you and you are told "you must act fast," ask for at least 24 hours to think about it and check on it.

7. Above all, if you are going to do your own investing, keep informed on the securities you buy after you have bought them.

* * *

Using the Services of Your Life Insurance Underwriter

Life insurance underwriters or agents are regarded by many of us as nuisances. This is a mistake. A good life insurance man can offer to you free many services it would otherwise cost you hundreds of dollars to buy. How can you use the services of your life insurance underwriter wisely?

1. Select a qualified man. Check his professional qualifications, the same as you would those of a colleague if you planned to refer a patient to him. What experience and education has he had? A good point to look for is whether he is a Chartered Life Underwriter. This is a designation he receives only after passing some rigorous examinations.

2. Maintain a professional relationship with him. Do not buy life insurance from good friends or relatives. You will not feel that you can disagree with them.

3. After you have selected a qualified underwriter, stay with him. If he knows he is going to get your business, he will value the relationship and work hard to preserve it. In addition, you can refer all other insurance salesmen to him, which will discourage callers.

4. When you discuss your estate plans with your attorney, accountant, or trust officer, always include your life insurance underwriter in the conversation. Use his time, he is there to give you service.

5. Finally, insist that all plans and proposals be presented to you in writing so you will have time to study them and ask questions about them.

* * *

Do You Have a Will?

A will is a necessary legal instrument for everyone, irrespective of age or income. If you die without a will, the law makes provisions for disposing of your estate for you, which may not be a disposition that you would agree with. Even in cases where dentists have wills, they are outdated because of changing circumstances. A quotation from a recent letter illustrates this situation. "Doctor Smith's will was executed before his last son was born in 1950. The actual distribution under his will is entirely different from what the dentist would like to have done with his estate." From experience, it has been observed that many dentists are making the same mistake. Consult your attorney periodically, review your will, and be sure that your estate will be disposed in the manner you want it to be. You owe it to your family.

* * *

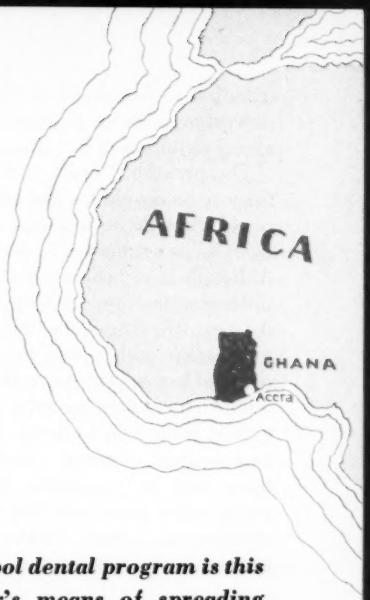
Some Estate Planning Questions

Before consulting an attorney and insurance man about your estate plan, you should think through the answers to these general questions:

1. *Who* should benefit from my estate?
2. *Why* should they benefit, or under what circumstances should they benefit?
3. *When* should their benefits go into effect?
4. *What* property best fits their needs?

Washington University
St. Louis, Missouri

DENTISTRY in a New Nation



BY SARA A. LEE, DDS

A school dental program is this author's means of spreading dental education in Ghana.

MY EXTREME interest in preventive dentistry led me, upon my arrival in Ghana, to study the manner in which it was applied here. My observations revealed that preventive dentistry was not the policy here in Ghana, and that the public in general was lacking in dental education. The most appalling situation was to be found in the schools, for unfortunately there was no dental education program. Consequently, children of the past have matured into the men and women of today, completely lacking in the knowledge of good dental health. The children of today were found to be following along the same path, as preventive dentistry has not yet found its way into the general education of the schools through any public health program.

Mention is made in the hygiene classes, social welfare centers, and public health programs, of the function of the teeth, and one is told that he should keep his teeth clean, and how to keep them clean by brushing them; but stress and importance is not placed on the duty an individual has to his teeth —as well as the role the dentist must play to help the individual care for, protect, and correct his dental needs.

Dentistry as it is here today among the school children and masses means only extracting teeth and placing temporary substitutes. These findings made me realize where I could best make my con-

tribution to Ghana, in the field of preventive dentistry among the school children.

The proverb, "Train a child in the way he should go, and when he is old enough he will not depart from it," is not limited to the home. Although it is believed that basic influences that mold a child's habits stem from the home, this I feel to be true only until he enters school. Once within the confines of school experiences, many of his acquired traits will undergo drastic and lasting changes. Therefore, there can be no other starting point, other than with the school children to assure Ghana of a healthy dental-conscious citizenry.

School Dental Program

To lay a firm foundation of preventive dentistry in the minds of the school children is the goal we hold as our duty: If we execute our obligation a future generation of citizens will not likely depart from the concept of preventive dentistry.

With these thoughts in mind I began to persuade the Government to allow me to undertake the organization and administration of a school dental program in Accra, Ghana. My proposals were approved and I began immediately with the actual organization.

The location of the clinic chosen for the school dental program was the dental wing of the Korle-Bu Hospital. The clinic was equipped with two complete operating rooms, one for the examination, charting, and x-raying of all the children; and the other for operative service and surgery. Since dental x-ray equipment was not available to our dental section, the cooperation of the main x-ray department was obtained.

The School Dental Program started at the Dental Clinic at Korle-Bu Hospital with one school on March 17, 1958. In May a second school was added, and in June a third school was added.

The procedure was as follows: A whole class attended on its first visit, and each child had his teeth examined and the results charted. Each class made subsequent visits on their designated days in groups of fifteen, at which time x-rays were taken, followed by a series of periodontal treatments, after which the necessary surgery and operative services were performed.

Vitamin Deficiency

Since March 17, through August 31, 2095 visits have been made to the clinic, which represents two or more visits per child. Periodontal treatments have been given to 537. In some cases care was needed so badly that three to five visits were required to complete the treatments.

It was found that a large percentage of the children were suffering from a vitamin C deficiency, in which case the children were told to drink citrus juices or eat plenty of the citrus fruits in their natural

form. Some of the fruits suggested were: Orange, grapefruit, pineapple, tomato, lemon, or lime. They were given a week's supply of the vitamin C tablets.

In a number of cases only periodontal treatments were needed. However, there were others who had dental defects which required additional visits. Of this group, 262 have had operative service performed, which included restorations, root canal therapy, and pulpotomy. Surgery has been performed on 204 children, including extractions, apicoectomy, wiring fractured and displaced teeth, and the removal of benign growths and cysts.

I am pleased to announce that I have completed all of the dental service for 369 children and I have issued completion certificates to each of them. Many children, not students in either of the three schools, have also been treated and the services performed for them are included in the totals.

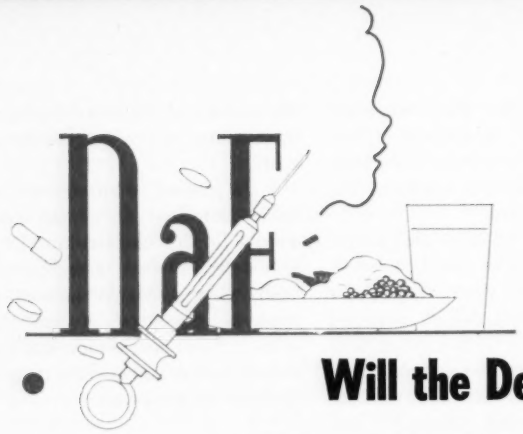
PO Box 3442
Accra, Ghana,
West Africa

ARE YOU SATISFIED WITH YOUR PATIENT RELATIONS?

A COMMON fallacy is to assume that we can proceed through life without public or human relations. Some unthinking individuals actually believe that public relations constitute an extraneous, isolated activity, which is too complex and too time-consuming for a busy man. Such people fail to realize that we have human and public relations whether we want them or not. We cannot stop people from evaluating us as individuals or as professional workers, and we cannot stop people from reacting in accordance with their evaluations. Our relationships with others will be poor, fair, average, good or excellent, depending upon the thought and energy we put into them, or upon the neglect or indifference we display. Patient relations represent a vital element—perhaps the most vital element—in the total activity of human relations conducted by dentists.—*The Journal of the Ontario Dental Association, Toronto.*

NEW TREND IN COLLECTIVE BARGAINING—DENTAL INSURANCE

THE FIRST industrial union to obtain non-profit dental insurance for its members through collective bargaining with Helena Rubinstein, Incorporated, is Local 14-149 of the Oil, Chemical and Atomic Workers International Union, AFL-CIO. The Group Health Dental Insurance Plan provides that the members may receive service from their own dentist and it pays benefits to any dentist anywhere in the world.



Will the Dentist Follow the Blacksmith?

BY SOLOMON GREENBERG, DDS

A RECENT issue of *Dental Times* stated that the demand for dental services has been steadily declining over the past several years. While I do not believe that our profession will become extinct in the forseeable future, there do seem to be good reasons why the average dentist's practice will continue to decline.

Heading the list of factors that have cut down dental practice is the fluoridation of drinking water. The reduction of dental caries in children by 50 per cent or more is tremendous—but all to the good.

Next, I would say that our better knowledge of dietetics—the value of high protein, and low sugar and starch consumption—has been of great benefit to the public. This leads to the thought that their will be a great reduction in the distaff side of our practices; and that in the future instead of losing a tooth for each child, women will protect their teeth and their torsos by counting their calories and thriving on sugar substitutes.

Of course, the emphasis on oral hygiene both by the dental profession and the dentifrice manufacturers has undoubtedly prevented many a molar from parting company with its owner. This progress has been greatly helped by the cooperation of the public school systems' dental examination programs in many communities throughout the country.

Then, too, the miracle drugs such as penicillin and the "mycins" have reduced the need for extensive dental treatment in many instances.

Here are some reasons why you may experience a decline in your practice.

Passing thought must also be given to the era of wholesale extractions when all ills of mankind were blamed on the teeth. This should probably be called the medieval period of medical practice, since physicians often "ordered" dentists to perform these operations. Need I add that nothing stimulated a patient's desire for a set of dentures more than the sudden loss of fifteen or twenty teeth —and I do mean sudden, for in those days dentists thought nothing of removing a mouthful of teeth in one visit.

To darken the picture a little more, we must remember that today we have specialists to relieve us of our burdens. While we should appreciate the help they give us with our difficult cases, still the fact remains that some of the patients with difficult cases have been known to refer patients with simple cases directly to, let us say, an exodontist because they were impressed by his services.

Now we are told by authorities that many of the extensive occlusal rehabilitation treatments should never have been performed. However, this type of practice affects a minority of the profession.

A gloomy picture of this kind would be incomplete without mentioning that an ever-increasing inflation, plus a steadily increasing supply of many new kinds of tempting consumers' goods, are continually making the public's dollar smaller and smaller. I need only add that we will, as we always have in the past, be placed at the bottom of the "shopping list."

Periodontal Disease

To complete this cheerful presentation let me add that although some of you will say that if caries does not get them in youth, periodontal disease will trip them up in old age, all I can say is that loose teeth have been tolerated for better and for longer periods of time than exposed, aching pulps, even to the point of a "do-it-yourself" exodontia job by the patient. And do not count on making full dentures for the geriatric patient, since he can be well fed with strained meats and vegetables just as we feed baby.

Let us hope that if on some far-off day our profession shall no longer be needed, that we too may be remembered with as kind and tender sentiments as Longfellow remembered "The Village Blacksmith."

359 *Fort Washington Avenue*
New York 33, *New York*

CLOSER COOPERATION BETWEEN THE DENTIST AND THE PHARMACIST

BY GILBERT LE VINE MELLION, DDS*

The Connecticut State Dental Association and the State Pharmaceutical Association have formed a joint committee to provide better service to dental patients.

SINCE World War II, not only has there been a marked increase in prescription writing on the part of dentists in the United States, but there has been a greater emphasis on the systemic administration of pharmaceuticals as an adjunctive treatment in the handling of oral disease.

It was in recognition of this fact that in 1954, an already existent Medical-Pharmaceutical group, invited the Connecticut State Dental Association to join it. Thus, from 1954 to 1958, we had in Connecticut the Joint Medical-Dental- Pharmaceutical Committee made up of five members from each society.

During this period the dental profession, through its representation on this Committee, had an active part in revising the narcotic laws of our state. Although the Committee did not have legal authority, it was able to discourage the sale of dental reliners by familiarizing the pharmacists with the dangers involved.

In 1955 each pharmacist and dentist who was a member of his state organization received a free copy of a dental formulary that was purchased and distributed by the respective association. This formulary was prepared by the National Conference of State Pharmaceutical Association Secretaries in cooperation with dental consultants. The great merit of this booklet to the busy practitioner is that he can readily find under the various classifications of analgesics, sedation, vitamin therapy, and antisialagogues, a printed prescription of the drug of his choice, which merely has to be copied on

*Doctor Mellion has been elected Chairman of the Connecticut Joint Dental-Pharmaceutical Committee. He is also Chairman of the Nutrition Committee of the Connecticut State Dental Association.

At a meeting in Hartford, the work of the new Connecticut Joint Dental-Pharmaceutical Committee is inaugurated with Doctor Gilbert L. Mellion as chairman. From left, Doctor Roger V. Ostrander, Waterbury, president, Connecticut State Dental Association; Morris H. Hurwitz, East Hartford, chairman, pharmacists' delegates; Doctor Mellion, Rocky Hill, chairman; and Francis B. Cole, West Hartford, president, Pharmacist Association.— ***Hartford (Connecticut) Times photograph.***

his prescription pad. For those who lack confidence about prescription writing, this booklet helps to make them less hesitant.

In the spring of 1958, by mutual agreement of the Executive Committee of the State Pharmaceutical Society, and the Board of Governors of the State Dental Association, it was felt that although the three-way group had been successful, the time had arrived for the formation of a separate Dental-Pharmaceutical Committee made up of five members from each profession which would meet every three months. These ten representatives would annually elect their own chairman and secretary. It was felt that such a committee could devote its entire agenda to dental-pharmaceutical problems, and would have the potential to explore avenues of interprofessional relationship more readily.

Committee's Objectives:

Some of the aims of the Committee are:

1. To encourage each dentist to obtain a narcotic number from the Internal Revenue Bureau. The most expeditious way to accomplish this would be to issue the proper narcotic application form to each new member of the state dental association at the time he receives his copy of the constitution and bylaws.

2. To establish a list of competent and qualified dentists and pharmacists who can be called upon to speak to each other's professional societies. The dentists would attempt to familiarize the retail pharmacists with the dangers in selling "do-it-yourself" items such as dental reliners, as well as providing accurate information about the dental products he is selling.

3. To encourage retail pharmacists to use ethical informative dental window displays by taking advantage of material available from the American Dental Association and the state health department.

4. To have each pharmacist and dentist purchase Accepted Dental Remedies (published annually by the ADA), which lists various preparations that have been accepted and approved for use in dental practice.

5. With the appearance of many new drugs that have potential use in the practice of dentistry, this Committee will explore the possibility of placing in the hands of each dentist a card file made up of sample prescriptions that could be used in dental practice. On the reverse side of the card would appear a brief description of the action of the drug, indications, counterindications, and dosage.

6. It has been agreed that a half-hour of each meeting of the Committee will be devoted to motion pictures or lectures, alternating on aspects of dental practice and pharmacy.

It is hoped that the publicizing of the formation of the Connecticut Joint Dental-Pharmaceutical Committee will encourage other dental societies to take the initiative in activating similar groups in their own states. Thus through the cooperation of dentists and pharmacists we can take another step forward to provide better service for our patients.

217 *Main Street*
Rocky Hill, Connecticut

BILL OF SALE

A FEW months ago the comedian Fernandel went to a dentist and had an aching tooth extracted. Said the dentist: "Don't pay now, I'll send the bill later."

Fernandel later received a letter from him. There was no bill inside, but instead a neat little sheaf of folding money and a note to explain.

"I've sold your tooth to one of your fans who is carrying it as a good luck charm," wrote the dentist. "From the proceeds I've deducted my professional fee, and enclose the balance."—*Detroit (Michigan) News.*

MINISTRY OF HEALING

A COMMISSION appointed in October, 1953, by the Archbishops of Canterbury and York to consider the "theological, medical, psychological and pastoral aspects of Divine Healing" has finally made its report, which is reviewed in the *British Medical Journal.*

The commission consisted of 28 members of whom 14 were of the clergy, 1 was a nonmedical scientist, 10 were physicians, and 3 were matrons of hospitals, all under the general chairmanship of the Bishop of Durham. Seventeen meetings were held, a questionnaire was sent to 75 societies and individuals, from which 60 replies were received; oral evidence was obtained from 12 persons, including 2 Christian Scientists. The British Medical Association cooperated to the extent of setting up a special committee to aid in the study.

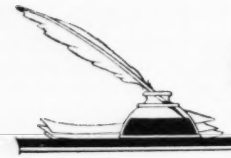
At the starting point was the axiom that the Church is charged with a commission to heal the sick; an obligation that is placed on clergy, physicians, and nurses. Also axiomatic is the principle that it is the entire indivisible person who is to be restored to health—not the soul and the emotions by the clergyman, and the body and the emotions—by the physician. Herein is the basis for cooperation between clergy and medical profession and on such a basis, instead of "faith healing," "spiritual healing" and "divine healing," the general term "ministry" of healing is more appropriate.

The part that faith plays in the healing of the sick cannot and need not be experimentally demonstrable. On countless occasions it has been convincingly evident.

The term "spiritual" need be viewed askance by no one, and least of all by the physician, who should appreciate as well as any the complicated pattern of personal existence and the varied and wondrous means through which health is so often restored.—*The New England Journal of Medicine.*

A DENTAL CRISIS

AT THE present time there are 112,000,000 people in the United States who now have some type of health insurance protection. Figures do not appear to be available for Canada, but would probably include the same relative percentage of our citizens. It seems paradoxical that while the old cliches of dentistry being a "health service" and the "close cooperation between medicine and dentistry in the common health goals" are repeated on every side, the facts do not bear out the cliche. Oral surgical benefits are specifically excluded by most of the Blue Shield, Blue Cross and PSI plans, unless the surgery is performed by "physicians licensed to practice medicine."—*Oral Health*



EDITORIAL COMMENT

"Give me the liberty to know, to utter, and to argue freely according to my conscience above all liberties." *John Milton*

WHAT KIND OF LEGISLATION DO DENTISTS FAVOR?

THERE probably will be bills that will come before the present session of the Congress, which will be displeasing to dentists.

One form of legislation that we may expect will be a proposed amendment of the social security laws to include hospital and health care for the beneficiaries of social security. Legislation of this kind was introduced before the last session of the Congress, but it was not enacted into law. The liberal membership of the present Congress will be more favorably disposed to pass legislation of this kind.

Another bill that was before the last Congress, and met the fate of inaction, provided that a self-employed person (a dentist, for example) could establish a tax-deferred pension trust fund for himself. Such legislation is certainly needed, because under the present law a self-employed person is discriminated against. Labor unions have enormous retirement and welfare funds; corporations have pension plans for all their employees. In either case the funds are accumulated before taxes. The self-employed person must pay taxes first, and if anything remains he is allowed to save the money.

In the mind of most legislators the dentist and physician are arch-conservatives, and are by temperament considered to be opposed to social legislation. That is, of course, only partly true, and it is certainly no disgrace. The dentist takes his own risks; he has no board of directors or stockholders to placate or please; he has no union organizers to harass him. He is an independent, one-man producer. In fact, he is one of the last of his kind in economic society.

When a legislator looks at the dentist he may picture him as a man

who makes considerable money, and as one who opposes legislation for the social welfare. Again the image is only partly true: the dentist does not make much money; he has, however, often been on the side of the reactionaries and opposed to social change.

When representatives of the dental profession appear before legislative committees they are often looked upon as unpopular witnesses. How is it, says the legislator, that you came here to oppose a bill that would provide health care for the beneficiaries of social security, and you ask for yourselves legislation that will allow you to build an estate with a considerable tax advantage to you? That *is* a question! How do we answer?

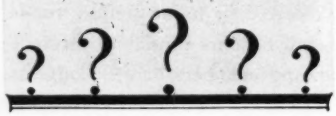
One answer might be that we are not asking for a favor. All we expect is a consideration similar to that received by union welfare funds, corporation pension trusts, and retirement benefits similar to those received by government employees, including members of the Congress. We are not pleading for preferential legislation or special privilege—a fair deal is all we ask.

We may find it more difficult to answer the charge of reactionarism. We did oppose social security legislation for years; we did oppose the Forand Bill that would provide health benefits to social security beneficiaries. It is ironic that we have contributed our skills to people on relief, but are opposed to helping the aged who are beneficiaries under social security. People on relief (or charity), where somebody else pays all the bills, receive our care. Those who have themselves paid into the social security fund are not so liberally considered for health care.

We have approved the activities of the United States Public Health Service. We have favored the use of government funds for dental research. These are evidence of our social enlightenment, or, if you prefer, our acquiescence to socialism. Do we mean that we favor the use of government funds to erect research buildings and to supply research grants, but are opposed to the treatment of individual persons? If that is our meaning it is time that we made our position clear to legislators.

Edward J. Ryan

So You Know Something About DENTISTRY!



BY ROLLAND C. BILLETER, DDS

Quiz 173

1. Inlay gold has a (a) low, (b) high, rate of thermal expansion. .....

2. True or false? Corticosteroids topically applied to inflamed sites, such as beneath a denture, may relieve distressing symptoms, but may interfere with the natural processes affecting the cause. .....

3. Conventional sleeve-bearing contra-angles and straight handpieces can be used successfully with speeds in the region of (a) 20,000-25,000, (b) 30,000-40,000 rpm. .....

4. Do properly manipulated amalgam restorations remain free from tarnish or corrosion in all but the most unhygienic mouths? .....

5. True or false? The great majority of needles broken during injections are those broken during the so-called "mandibular injections" for anesthetization of the inferior dental nerve. .....

6. What causes the traumatic mucosal irritation noted frequently in elderly denture patients? .....

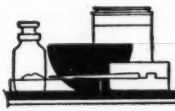
7. Carcinoma of the gingiva usually occurs in (a) the molar and bicuspid region (b) the anterior part of the mouth. .....

8. How are embedded mesiodens detected? .....

9. Recent evidence indicates that the pulp is a (a) remarkably resistant, (b) delicate, organ.

10. From what structures do odontomas arise? .....

FOR CORRECT ANSWERS SEE PAGES 76 and 78



TECHNIQUE of the Month

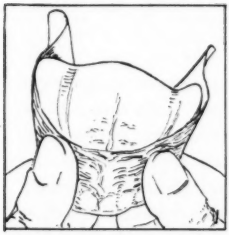
Originated by W. EARLE CRAIG, DDS

Quicker and Easier Denture Servicing

Drawings by Dorothy Sterling

Protecting Denture When Relining

By TALMAGE V. ROGERS, DDS



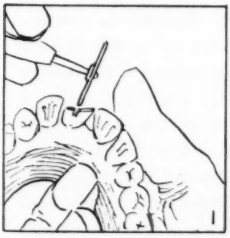
Dry denture thoroughly. Cover entire outer surface with ordinary painters' masking tape, stretching and pressing it to the contours of the denture.

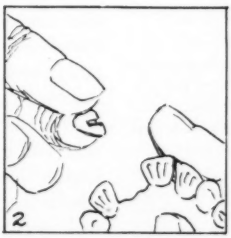
With scissors, cut away the excess tape from the periphery.

Proceed with relining. Then strip tape from denture. All smudges of impression paste or relining material will be on the tape, not on the denture.

Removing Broken Tooth from Acrylic Denture

By LLOYD H. FRINK, DDS





With a carborundum disk running at high speed, cut a slot in the center of the broken tooth.

The friction of the disk will heat the tooth in 30 seconds. It can then be removed from denture without damaging adjacent areas.

ASK Oral Hygiene

Please send all correspondence for this department to: The Editor, *Ask Oral Hygiene*, 708 Church Street, Evanston, Illinois. Enclose a stamped, addressed envelope for a personal reply. If x-ray films are sent, they should be protected with cardboard. We cannot be responsible for casts or study models that are mailed to this department.

Iodine Deficiency

Q.—In the August 1958 issue of ORAL HYGIENE, subject BONE METABOLISM, you mention prescribing ground sea kelp tablets "in an effort to supply needed bone building minerals."

Could these tablets help build the supporting bone that has been lost around natural teeth? If so, I should like to know where these tablets are obtainable, the dosage suggested, and any possible contraindications.—H.N.S., New York.

A.—The suggested use of ground sea kelp is for the purpose of supplying sufficient iodine for proper iodine metabolism for normal thyroid function. Dysfunction of the thyroid gland interferes with proper bone metabolism. This can give rise to resorption of the alveolar bone and gingivitis.

If the patient does not receive a sufficient amount of iodine in salt or seafood, you can prescribe 3 tablets of Parkelp® a day; this can be obtained at a pharmacy.

Traumatic Occlusion

Q.—I have a patient who complains of a burning sensation between the upper central incisors. This burning lasts from several minutes to several hours at a time. It does not seem to occur at a certain time of the day routinely. The patient has some loss of vertical dimension. I have placed occlusal guide planes on his lower posterior teeth in the hope that the burning sensation between the upper centrals would be relieved. Such is not the case, for he still has the burning sensation with his upper anterior teeth out of occlusal.

Can you give me any advice as to the cause and treatment of this condition? I do not want to go ahead with any permanent reconstruction until I can correct the foregoing complaint.—T.B., Tennessee.

A.—When traumatic occlusion is present but there is no mobility of the affected teeth, there is frequently a heightened sensitivity of the teeth to thermal change, especially to cold. This seems to indicate that the overstress has caused a disturbance of the periodontal circulation, centering at the root apex, with resultant disturbance of the pulpal circulation. This is accompanied by excitation of the pulpal nerve supply. Relief is usually prompt after the traumatic occlusion has been relieved. It is evident that the chief response to the occlusal overstress is in the nerves supplying the pulps of the upper anterior teeth, resulting in the burning sensation. I would suggest that you relieve this overstress by filing down the labial surface of the incisal third of the *lower* centrals and laterals.

Rapid Resorption

Q.—I have a 50-year-old woman patient who has had three sets of dentures for various reasons over the last fifteen years. The last set, which I made and which were "most satisfactory" two-and-a-half years ago, have been relined once. At that time I opened the bite ten mm to correct the vertical. The vertical is now closed to almost half that amount. Would it be advisable to reopen the bite, considering the slight amount of retention due to shrinkage of the lower ridge?—R.P.R., Maine.

A.—The problem of establishing the proper vertical relationship of the upper and lower jaws of this type is extremely difficult. The final judgment as to whether or not you should open the bite more to offset the rapid resorption of the lower ridge should be governed by the general satisfaction the patient is at this time enjoying with her dentures; and whether maintaining the status quo will do harm to the temporomandibular relationship and other problems that are associated with an over-closed bite.

It may well repay you to try and discover what the cause of this bone shrinkage may be. The patient may have a thyroid dysfunction and require medical therapy. Then again, since the patient is a woman and age 50, there may be some postmenopausal changes that may require medication. Since this patient will be wearing dentures for at least another twenty years, it would be beneficial to determine how you can stem such drastic changes in the foundation of the dentures. At this particular time, I would be inclined to refrain from any further relining or making of new dentures.

Reseating Avulsed Incisor

Q.—A patient had a permanent central incisor knocked out. He came to me immediately after the accident with the tooth held in his hand. It was not fractured. I placed this tooth in a salt solution, and under a local anesthetic I pushed the tooth back into the socket. At the same appointment I banded the adjacent incisors with stainless steel orthodontic bands, and tied the central to the rest of the incisors with an edgewise arch wire. I have taken x-rays before and after, and do not see any appreciable changes as yet. The swelling and pain have subsided, and the patient is doing well.

Now I would like to know what I should have done. I do not know of any such techniques, as this is hardly taught in school. I would appreciate your reply and suggestions.—F.S., Hawaii

A.—The procedure followed by you in reseating and immobilization of the avulsed central incisor was as correct as the "book" would have it. In adults, the chances are not as hopeful; though the chance is worth taking. However, in either child or adult, we must remember that reattachment is by virtue of: first, fibrosis; and second, ankylosis.

Discoloration of the tooth is usually the rule. To avoid this, and in view of the type of reattachment which is to occur, it is deemed proper and wise to extirpate the pulp (in vitro), wash out the pulp chamber with peroxide of hydrogen, 3 per cent, ream the canal, and fill it with your favorite canal

filling material. The apical end should be burnished with a hot instrument. Then replace the tooth in its alveolus and fix it for immobilization as you did, or with figure "eight" ties anchored to the adjacent two teeth to both mesial and distal of the avulsed tooth.

The patient should also be given a therapeutic dose of antibiotic, either penicillin injection of 600,000 or 800,000 units, intramuscularly; or a good oral agent such as one of the tetracyclines, or erythromycin in 250 mg doses every four hours around the clock for 10 to 12 doses. The wires or other mode of fixation should be kept in situ from 3 to 6 weeks, depending upon the age, damage to the bone, and secondary infection.

Stain Removal

Q.—A woman patient of mine, age 54, was ill four years ago with a kidney condition and hypertension, and was put on the rice diet. She has now regained a fairly normal physical condition, but the teeth have been affected despite supplementary vitamins and calcium. The upper centrals and several other teeth are eroding from the gingival line. There does not seem to be any evidence of dental caries as yet, so no replacements have been made. There are heavy dark stains on the teeth similar to those that smokers have, but she does not smoke. These stains are more pronounced on the back surfaces. Prophylaxis is of little help.

I shall appreciate your suggestions.—R.M., Florida

A.—There is no ideal solution to the removal of stains from roughened, inaccessible surfaces in the enamel. The use of 5 ml of 30 per cent hydrogen peroxide solution with 1 ml of ether applied with heat is satisfactory provided many such treatments are made. In this case, caution must be taken not to contact the soft tissues, and the two liquids have to be shaken well before application. To prevent further erosion, the following suggestions are made:

1. Make sure that all teeth are free from caries.

2. Be sure that there is no environmental involvement around the teeth, such as gingivitis.

3. Thorough brushing and proper use of dental floss after every meal. (Care should be exercised so as not to mechanically abrade the eroded areas.)

4. Avoidance of soft drinks, chewing gum, and other materials containing carbohydrates between meals.

5. Use of an alkali mouthwash three times a day.

Dentures and Sensitive Teeth

Q.—I have an elderly patient about 75 years old who is having difficulty wearing his upper denture. At times he cannot dislodge it, but the moment he talks it drops out.

1. Do you think he cannot coordinate his muscles of speech while he is talking? Although I have checked repeatedly with carbon paper, I cannot record a high spot.

2. I made the anterior part of the denture heavy in order to compensate with the deep grooves of his face. Do you think this interferes with the suction of the denture?

3. The patient told me his lower denture is satisfactory. I did not make the lower one, just relieved the sore spots

now and then. Now he complains he cannot wear the upper or lower denture. I believe his lower denture needs relining, but he will not cooperate. He also develops sore spots on his lips on the posterior borders. I believe his diet may be inadequate, and I have told him to drink plenty of orange juice, and to take vitamins, but I doubt if he follows the instructions.

Another problem: I also have difficulty in treating the sensitive necks of teeth. I use silver nitrate followed by tincture of iodine, also equal parts of sodium fluoride, white clay, and glycerin. I give the patients instructions not to eat pickles, onions, sharp peppers, lemon, and grapefruit; but I do not get satisfactory results.

I shall greatly appreciate your advice in regard to these problems.—L.H.K., Illinois

A.—Without a medical history of your patient, and more information of the relationship of the upper and lower teeth as to occlusion and to vertical dimension, it is difficult to give an exact cause of the troubles your patient is experiencing.

There are many things which could be causing the problems of this case:

1. The mucous ducts in the posterior region of the upper palate can produce excessive saliva and loosen the upper denture. This can best be remedied by extending the posterior border to the soft palate and applying a heavy postdam.

2. Sometimes the desire to make an esthetic denture and construct a heavy labial flange, can produce resistance to the muscles of speech. With some cases of elderly patients, it is impossible to produce good function, which imparts stability and retention, and esthetics at the same time.

3. In an elderly person, marked changes usually take place in the lower ridge and in the relationship of the temporomandibular joint. With the mouth in repose there should be approximately 3 mm of space between the upper and lower incisors.

Your patient has experienced much difficulty and, in my opinion, I believe that from a long term view, construction of a new balanced set of dentures would be the only solution.

As to hypersensitive teeth, ammoniacal silver nitrate, 33 per cent sodium fluoride paste, and zinc chloride solution (40 per cent) followed by potassium ferrocyanide solution (20 per cent) generally are effective agents to combat this. An 80 per cent solution of zinc chloride can be applied provided it does not approximate a deep cavity and if it is applied cautiously. Another remedy you might try is a product called Thermodent® It contains formaldehyde paste and can be applied with safety by the patient at home.

Gingival Hemorrhage

Q.—Would you please be kind enough to give me a practical reply to the following:

I have two patients, both women in middle age, who complain of gingival hemorrhage, which occurs mostly at night while sleeping. Both patients have normal appearing gingivae. The throat, tonsils, and lungs, are normal. They neither drink nor smoke. I have scaled

the teeth, and applied "trichloroacetic acid tincture." I have asked the patients to apply an astringent mixture, and have prescribed injections of vitamin C (500 mgs), together with calcium gluconate and chloride, every day, for quite a long period of time. The hemorrhage did not subside.

Please advise how to treat these cases. —C.D.P.M., India

A.—In the absence of a complete medical history and x-rays it is difficult to give you the exact diagnosis and treatment for the bleeding that you describe. Since the patients are both female and middle age, it is possible that the bleeding may stem from systemic causes. The postmenopausal period results, in many women, in a low estrogenic blood level which may influence the vascular supply of the oral mucosa. It may be advisable for you to prescribe high potency vitamin capsules containing at least 50 mg niacin each, to be taken before each meal, plus a diet high in meat proteins and low in carbohydrates. If vitamin therapy has failed to help, I would suggest a gynecologic consultation.

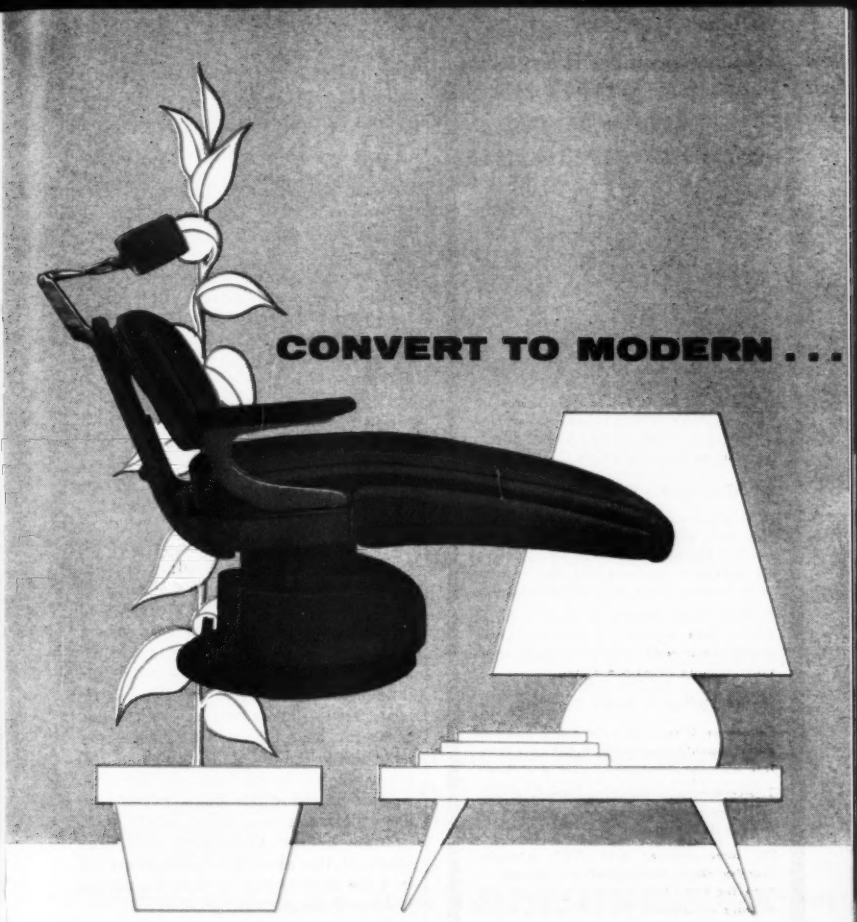
Abscess

Q.—A patient, age 35, came to me with a fistula between the upper central and cuspid area. An x-ray revealed that the area around the central was involved. I prepared to take the central out, but first ran a vitality test on the central and found that it was quite vital and immobile.

Would you advise taking the central out? What is your thought as to what caused the abscess?—D.L.M., Tennessee

A.—Undoubtedly a lateral abscess is present along the distal surface of the upper left central. The involvement has reached a stage of an alveolar crest osteomyelitis as is evident by the presence of a

(*Continued on page* 66)



. . . FOR ALL PHASES OF DENTISTRY

through the addition of a Hek Seat, Back Rest and Head Rest on a conventional dental chair. The result—a modern yet professional looking chair affording the ultimate in patient comfort. Subtle, soothing vibrator optional.

An ever-increasing number of dentists throughout the U. S. and Canada are endorsing this significant advancement.

For additional information about converting your present dental chairs, see your local dental supply dealer or write to:

HEK MANUFACTURING CO., 1581 CHURCH ST., SAN FRANCISCO, CALIF.

sequestration of the crest bone. The central should be extracted and the remaining sequestra of the crest bone should be removed.

Gagging

Q.—One of my patients, a man of middle age, who has had dentures for six months, uses them at meals only. He has no trouble while eating, but starts gagging immediately after. I refit the upper to be sure I had a good post-dam, but there is no improvement. I then looked through the volumes of THE YEAR BOOK OF DENTISTRY, and in the 1952 volume, page 460, I found the following, which sounds good to me.

"Charles W. Lincoln, Pasadena, California, states . . . 'In some cases, however, all attempts fail to remove the reflex. In such cases, alcohol injections bring immediate relief.'

"Method.—The soft tissues overlying the junction of the hard soft palate are painted with a 1:1 mixture of tincture of iodine and tincture of aconite, and dried with a blast of warm air. About 0.5 cc procaine hydrochloride is injected about 4 mm distal to the lesser palatine foramen. When anesthetized, the denture is inserted to make certain that the gag reflex has been eliminated. The denture is removed and about 10 minims of 190 proof alcohol is injected into the same regions on either side distal to the foramen. This causes a slight sensation of fullness in the pharyngeal wall. The effect of the alcohol usually wears off in a few months and by then the patient is free of complaints."

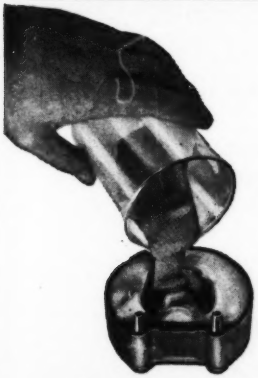
Please advise if you have had any experience with the alcohol treatment. Have you anything better to recommend?—J.W.V., Texas

A.—I am not familiar with the technique of alcohol injections for the purpose of reducing gagging sensitivity. I believe, in accordance with many other dentists, that the modern use of tranquilizing agents and education of the patient are the best means of overcoming the difficulty accompanying new den-

(*Continued on page* 70)

POUR-A Densene*

THE DENTURE RESIN THAT IS POURED



1 FAITHFULLY REPRODUCES CAST AND MOLD DETAIL.

2 CONSERVES CHAIR TIME REQUIRED FOR OCCLUSAL AND SORE SPOT ADJUSTMENTS.

3 MINIMIZES ONE OF THE PREVALENT DENTURE PROBLEMS — FRACTURING THROUGH THE CENTER OF THE PALATE.

Available in: **Pink — Clear — Tis-Hue▲ Light — Tis-Hue▲ Medium — Tis-Hue▲ Dark**

POUR-A *Densene** provides these advantages by virtue of its strength and the ability to preserve occlusal balance and dimensional stability during and after processing.

* Cross-Linked ▲Fiber Characterization

Cosmos DENTAL PRODUCTS, Inc.

43-30 22nd Street Long Island City 1, N.Y.

THE BLOCK DRUG COMPANY

Whether your patient is four years old, or eighty-four, or in between, there is a Block Drug Company product whose quality merits your recommendation –

A product so *tested* that you know your patients will accept it, will enjoy using it, and will benefit from it.

AMM-I-DENT

proved effective in caries reduction . . .
recommended by more dentists
than any other dentifrice

GREEN MINT

detergent mouthwash with fresh minty
flavor and deodorant action

POLIDENT

"soak-rinse-wear" cleanser – recommended
by more dentists than any other
denture cleanser

POLORIS

local analgesic for the prompt relief of pain
in abscess and other dental conditions

BLOCK DRUG COMPANY, INC. 105 Academy St., Jersey City 2, N. J.

FAMILY OF FINE PRODUCTS

tested in the laboratory – for scientific formulation, packaging effectiveness, and satisfaction in use
tested in manufacture – controlled to the finest quality standards
tested in the market place – so that patient satisfaction results in increased acceptance of professional guidance

"Quality Products for Dental Health"

PY-CO-PAY

the professional toothbrush with Py-co-*TIP* – recommended by more dentists than any other toothbrush . . . also salt and soda tooth powder ·

WERNET'S POWDER

speeds the mastery of the new denture – recommended by more dentists than any other denture adhesive

WERNET'S DENTU-CREME

non-abrasive cleansing cream specifically formulated for dentures

WERNET DENTURE BRUSH

reaches all parts of the denture and gives long lasting wear

A Family of Fine Products for Your Family of Patients

tures. These drugs, properly used, can promote rapid acceptance of prosthetic appliances, minimize self-consciousness and embarrassment, and to a large extent relieve the patient of emotional distress directly associated with the presence of a foreign object in the mouth. Recommended dosage, two tablets a day (morning and evening) of meprobamate (Equanil® or Miltown®) 400 mg. As a rule, medication may be discontinued in ten days to two weeks. By then, the patient should be adjusted to his dentures.

Poor Occlusion

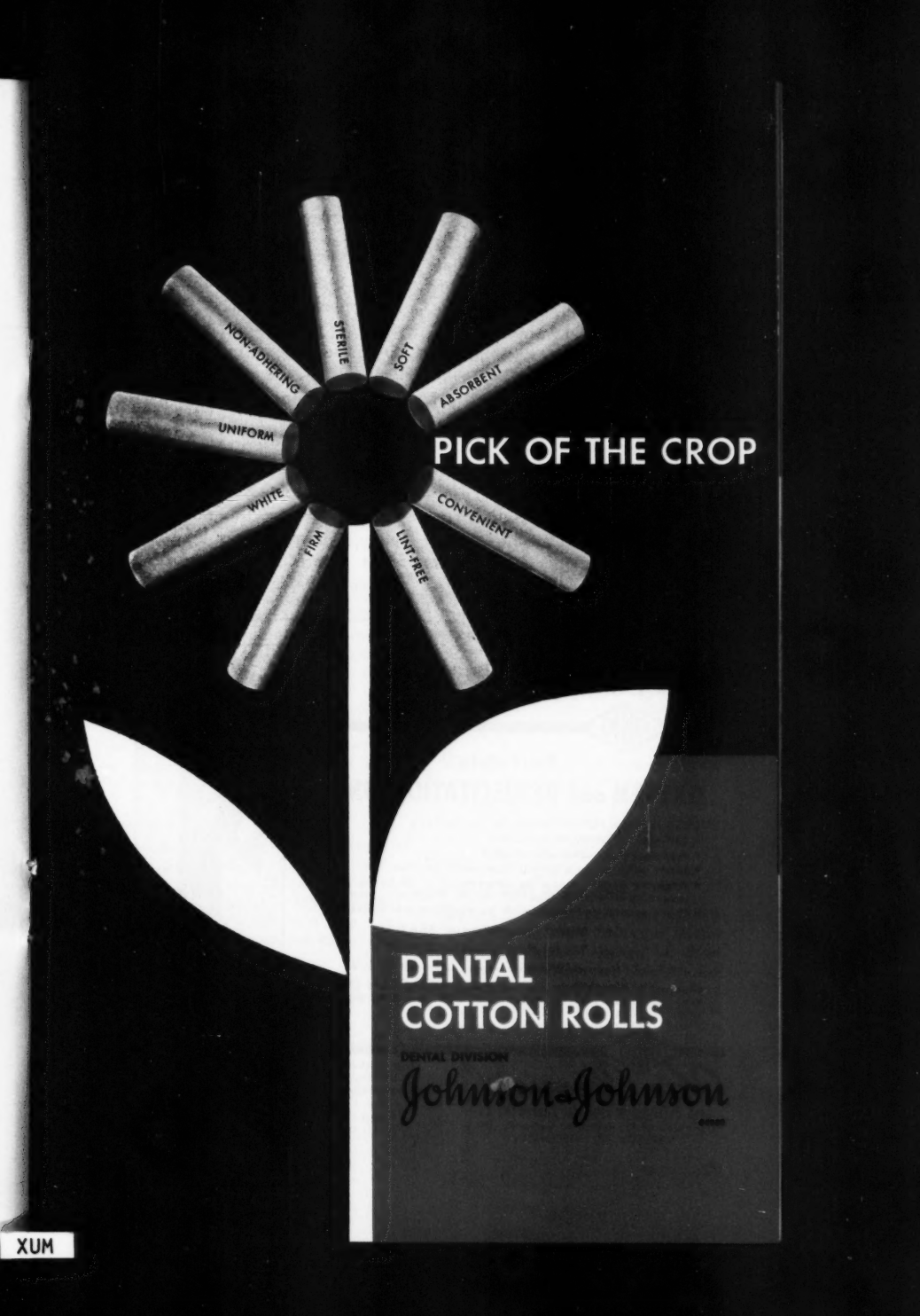
Q.—The patient is a man about 65 years old, and has a slight case of diabetes. He has a lower cast partial, and has had four upper dentures. Two were acrylic, one with a metal palate. The one he wears now is a roofless, acrylic denture without suction cups. Sometimes it is tight, and other times it loosens up.

His chief complaints are: (1) As soon as he puts the upper denture in, his mouth fills up with a heavy saliva, so that he can keep the denture in for only a short period. (2) He has a burning sensation in the palate when he wears the denture. Also, when he has the denture in he continuously moves his lips and his lower jaw as if he were trying to push the denture up.

I shall appreciate your suggestions.—H.B.S., Massachusetts

A.—I see no reason why the existing diabetes should be blamed for the ill (or uncomfortable) fit of your patient's dentures. From your description, it sounds as though these dentures are laboring under poor occlusion and/or improper vertical with a resultant chain reaction of poor free way space, abnormal functional occlu-

(*Continued on page 72*)


STERILE
SOFT
ABSORBENT
NON-ADHERING
UNIFORM
WHITE
FIRM
LINT-FREE
CONVENIENT
PICK OF THE CROP
DENTAL
COTTON ROLLS
DENTAL DIVISION
Johnson & Johnson

sion and maldistribution of stress forces to the mucosa and the underlying supporting bone.

The first thing to do is to see that the initial contact and the ultimate functional stresses are relegated to the posterior teeth, even if it becomes necessary to leave the anteriors out of contact with one another when the teeth are firmly clenched. The attainment of contact of the upper posteriors to their lower counterparts during the patient's ideal vertical positioning, with the anteriors in esthetic setup and not touching one another (upper/lower) has proved to be the most successful procedure. If the ideal mechanics are incorporated in the upper denture and the problem still persists, I would advise the use of tranquilizers for a period of about four weeks.

THE COST OF TASTES

MAN consumes nearly 100 pounds of sugar per person per year. Furthermore, the American public gulps 10 billion dollars worth of alcoholic liquors per year. Thus, powerful advertising plus this physiologic inclination, makes Americans spend as much for sugar-rich soft drinks as they do for the care of their teeth and as much for alcoholic beverages as they do for their entire medical expenses.—*Geriatrics, Minneapolis, Minnesota*

Dentists in the NEWS

Makes Archery Equipment

An enthusiasm for sports has carried Doctor J. C. Moses of Wolf Point, Montana, far beyond the shooting stage in archery. He makes his own bows and arrows, and since 1954 he has turned out more than thirty bows and innumerable sets of arrows. He had little information when he first began making his bows, but he studied what books and magazine were available, and incorporated many of his own ideas. His reading has also included the study of the history of archery. For instance, he found that only recently were bows made that could shoot an arrow as far as those used by the ancient Turks.

Doctor Moses' bows are from 62 to 68 inches long, and are made mostly of two strips of maple glued together, faced and backed with strips of glass. The riser, or middle piece of the bow, is made of walnut, with the handle of deerskin or horsehide. It takes about ten hours to make a bow. Arrows are of glass, metal, or cedar—*Great Falls (Montana) Tribune.*

Dentist-Lawyer

Because he had long been interested in law, particularly as it applies to the medical profession, Doctor David M. Cooley of Springfield, Massachusetts, decided to study at Western New England Law School while practicing dentistry. He recently passed his bar examination.

As far as he can tell now, he will major in the dental profession, make some use of his knowledge of the law, and "give" of his training in both fields through part-time teaching in some school or college.—*Springfield (Massachusetts) Union.*

Nebraska Dean Retires

After serving for 19 years as dean of the University of Nebraska College of Dentistry. Doctor Bert L. Hooper has retired. He has devoted about forty years to initiating and encouraging programs for improving dental education.

From the time as a high school lad when Doctor Hooper invented an 8-day automatic chicken-feeding device, his manual dexterity has been a valuable asset. Besides helping him decide to enter the dental profession, it has assisted him in utilizing through what he calls "gadgetry," every fraction of an inch of whatever office space he happens to have.

During the 1920's Doctor Hooper built a sighting device for motion picture cameras which could be used in filming football games. These movies were used in coaching the team, thus initiating a procedure now employed by all coaching staffs throughout the country.

When he takes a few moments from his work, Doctor Hooper writes poetry. He explains in one poem entitled "Why," "It soothes my nervous system —takes me to a world sublime."—*Omaha (Nebraska) World-Herald.*

92 And Still Practicing

One of the oldest practicing dentists in the State of South Dakota is Doctor Hewitt Hall, who celebrated his 92nd birthday recently. He has been practicing dentistry for the past 63 years, and has no plans for retiring. "Many dentists ask me about my plans when they see me at conventions each year," he said. "I don't understand why. I'm in excellent health. I keep a full schedule, and

(*Continued on page 74*)

I don't know what I would do with my time if I retired."—*Sioux Falls (South Dakota) Argus-Leader.*

Brazil Dental Project

Rochester's dental health supervisor, Doctor Hugh M. Averill, says he has been "slowed down" by the crippling aftereffects of poliomyelitis, but it does not seem so. Although he needs one cane for walking on level areas and two canes for walking up and down steps, Doctor Averill is now helping to conduct dental experiments on an isolated rubber plantation in Brazil. In the two weeks before he left for Brazil, Doctor Averill conducted four performances of Gilbert and Sullivan's "H.M.S. Pinafore," and directed a thirty-piece orchestra, a twenty-voice chorus, and nine principals in the Webster Theater Guild production sponsored by the Rotary Clubs in Webster and Marion.

The Brazil experiments will test a theory that phosphates help prevent dental caries. The project is being directed by Doctor Basil M. Bibby, director of Eastman Dental Dispensary, on a $72,600 grant from the United States Public Health Service.—*Rochester (New York) Times-Union.*

Dentist, Minister, Carpenter

At the age of 94, Doctor Willie Sherman Marshall is visiting the ill and the aged in rest homes, hospitals, and state institutions. To these people he brings reassurance from the Bible as well as from his personal experiences, even though, with two exceptions everyone he visits is younger than himself.

Doctor Marshall practiced dentistry in Bangor, Maine, until 1949. Then he moved to East Corinth where at the age of 72 he built himself a good-sized home.

Once he had closed his office, Doctor Marshall found he could devote more time to "doing good and helping my fellow man." He had been ordained a minister in 1949 under the Dawn Bible Students Association, a nondenominational organization.—*Bangor (Maine) News.*

Receive British Honors

Three St. Petersburg, Florida, dentists have been elected to The Royal Society

of Health, an honorary society in London, England. They are: Doctor Melvin E. Page, Doctor Vincent R. Trapozzano, and Doctor Bernard C. Kehler.

The society until recently was open only to residents of the British Empire. Members are chosen by invitation and elected on the basis of professional standing and work in academic fields such as teaching.—*St. Petersburg (Florida) Times.*

Research Award

The annual Callahan award of the Ohio State Dental Association has been presented to Doctor George C. Paffenbarger, who is senior research associate of the American Dental Association at the National Bureau of Standards, Washington.

The Callahan award, named in memory of a Cincinnati dentist, Doctor John Callahan, is given annually to a practitioner who is outstanding in research. Doctor Paffenbarger is in charge of testing all new dental products before they are approved by the American Dental Association.—*Cincinnati (Ohio) Post.*

Ex-Dentist to Hess

A German-born dentist who once treated Rudolph Hess, the Hitler lieutenant who later defected to the Allies, is a Daytonian now. But he is operating a dry cleaning firm instead of conducting a dental practice.

As a dental student, working on his doctor's dissertation in Munich, Germany, in 1932, Eric E. Kohlhagen was assigned to assist a dental surgeon. It was in this capacity that he operated on Hess. In 1938 when he was practicing dentistry in Halle, Germany, the Gestapo paid him a visit. He was accused of writing things against the government to relatives in America. "I wouldn't have done that," Kohlhagen said, "because we knew everything was censored—but they said I did, and that was that."

In the years that followed Kohlhagen was shifted around to six different concentration camps. On April 5, 1945, he escaped amid intense Allied bombings, went into hiding for eight days, and then met up with Allied troops. In

(*Continued on page 76*)

March 1946, he came to the United States. "I had no money, and I thought I was too old at 38 to go back to school," he says now.

He went to work operating a bottle washing machine in a dairy, and later started a dry cleaning establishment. From a $2000 investment he has built a $35,000 business. He likes his new career, but he remembers his days as a dentist with some nostalgia. "If Dayton ever gets a medical and dental school I might just go back and take the training I need to practice," he says.—*Dayton (Ohio) News.*

Awards for items submitted for this month's DENTISTS IN THE NEWS have been sent to:

Thelma L. Rounds, 213 Garfield, Wolf Point, Montana

T-Jay Mahoney, 143 Homestead Avenue, Indian Orchard, Massachusetts

Ralph M. Rettig, 1027 Durant Street, Harlan, Iowa

Mrs. R. E. Bredenberg, Jr, 1315 South Blauvelt Avenue, Sioux Falls, South Dakota

Mrs. J. A. Murphy, 363 Chili Avenue, Rochester 11, New York

Kathryn Power, Box 537, Ellsworth, Maine

Edith R. Brown, 515 72nd Avenue North, St. Petersburg, Florida

George P. Moore, RR 1, Box 220, College Corner, Ohio

SO YOU KNOW SOMETHING ABOUT DENTISTRY!

ANSWERS TO QUIZ 173

(See page 58 for questions)

1. (b). (Ney Bridge and Inlay

(*Continued on page 78*)

The Crescent WIG-I-BUG

The WONDER ELECTRIC MORTAR & PESTLE

is not only a practice builder from the standpoint of consistently better fillings, but also a great convenience and time saver. It amalgamates in 7 seconds! Biscayne Blue, Jade Green, Washington Coral (Plain, Standard, complete outfits) only $65.50. Jade Green Mottled, Biscayne Blue Mottled, (Unbreakable, complete outfits) only $70.50. Gleaming White, $60.50. Beautiful Black, $55.50.

ORDER TODAY

Thousands of dentists, the world around, will tell you that there is nothing like the Wig-I-bug for producing smooth, fine textured mixes of alloy . . . mixes that assure uniformly better, finer setting, stronger, longer lasting fillings. Often imitated, but never equalled, this practical scientific instrument is preferred wherever dentistry is practiced—in dental offices, colleges, clinics and by the army and navy here and abroad. Available at your nearest dealer in beautiful black, gleaming white and glorious color to match your office decor. For complete details see your dealer or write today.

CRESCENT DENTAL MFG. CO.

1839 South Pulaski Road, Chicago 23, Illinois

Book, Hartford, Connecticut, J. M. Ney Company, 1954, page 76)

2. True. (Accepted Dental Remedies, ed. 23, American Dental Association, 1958, page 3)

3. (a). (Ingraham, Rex: An Evaluation of Recent Progress in the Field of Increased Speeds on Modern Instrument Design, J. Pros. Dent. **7**:835 November 1957)

4. Yes. (Mosteller, J. H.: Role of Silver Amalgam in a Modern Dental Practice, JADA **55**:341 September 1957)

5. True. (Archer, W. H.: A Manual of Oral Surgery, ed. 2, Philadelphia, W. B. Saunders Company, 1956, page 422)

6. The friability of tissue caused by dehydration of the mucosa, together with a gradual thinning of the epithelial layer. (Jamieson, C. H.: Geriatrics and the Denture Patient, J. Pros. Dent. **8**:9 January 1958)

(*Continued on page* 80)

Bleeding Gums Respond to Oxygenation

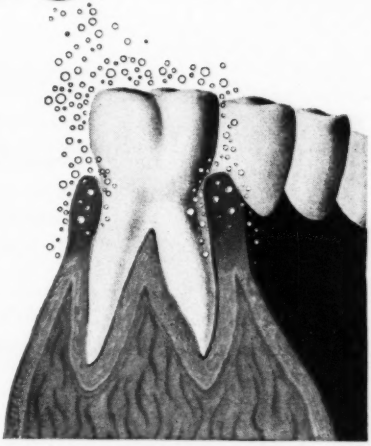
Recent studies interestingly point up the fact that inflamed gingival tissues need and respond to oxygenation.[1]

AMOSAN **supplies more oxygen**— Amosan (Sodium Peroxyborate Monohydrated Buffered with Sodium Bitartrate Anhydrous) supplies 550% more oxygen than Sodium Perborate N.F.[2] Low surface tension (37.3 dynes per cm.) of AMOSAN solution promotes pocket penetration.

AMOSAN **is a 93.3% effective adjunct in treating gingival irritation**[2]— Amosan is a concentrated oxygenating agent that combats anaerobic oral bacteria and instantly supplies millions of tiny bubbles of oxygen needed by inflamed gingivae.

A rigidly controlled double-blind study at a leading medical center[3] showed Amosan to be 93.3% effective in the treatment of inflamed bleeding gums.

At the first sign of bleeding gums, gingival recession or tooth mobility, use, recommend and prescribe



1. *Oxygen uptake by normal and inflamed gingiva and saliva. Schrader and Schrader. Helvets. odont. acta. 1:13-16, (April) 1957.*
2. *Behrman, S. J.; Fater, S. B.; Grodberg, D. L.; An Evaluation of Oxygenating Agents in the Treatment of Gingival Inflammation. J. Dent. Med., (October) 1958.*
3. *The New York Hospital—Cornell Medical Center. Presented as a Scientific Exhibit at the American Dental Association Annual Session, (November) 1957.*

AMOSAN

Samples and professional literature available upon request.

THE KNOX COMPANY 1400 Cahuenga Blvd., Los Angeles 28, California / Fort Erie, Ont., Canada

7. (a). (Sarnat, B. G. and Schour, Isaac: Oral and Facial Cancer, Chicago, The Year Book Publishers, 1950, page 84)

8. Only by x-ray examination. (Douglas, B. L. and Kresberg, Harold: Mesiodens, Dental Radiography and Photography, **30**:70, No. 4, 1957)

9. (a). (Robinson, H. B. G.: Pulpal Effects of Operative Dentistry, J. Pros. Dent. **7**:282 March 1957)

10. Tooth structures or from those embryonal structures from which the tooth develops. (Archer, W. H.: A Manual of Oral Surgery, ed. 2, Philadelphia, W. B. Saunders Company, 1956, page 364)

Small Investment..

BOOS SAMPLES PAY FOR THEMSELVES OVER AND OVER

Your patient has a better understanding of your case presentation when you illustrate it with the actual case constructions of Boos Demonstrating Models.

You save hours of chair time and many patients will choose a better type restoration when able to compare.

BOOS *Versatile* 6-CASE PARTIAL DEMONSTRATING SET

Complete Set $122.50
One-Half Set $62.50
(Either upper or lower models)

Complete with display case, upper and lower models of natural pink acrylic and three interchangeable cases for each model as follows:

- **Vitallium and Porcelain**
- **Stainless Wrought-Wire Frame, Gold Clasp with Acrylic Saddles**
- **Acrylic Horseshoe with Wrought-Wire Clasps**

Cast Vitallium Frame with Acrylic Saddles may be substituted for Vitallium and Porcelain.

******Entire set of 8 cases described above available with display case and models* **$189.50**
One-Half Set (4 cases) either upper or lower . . **$ 95.00**

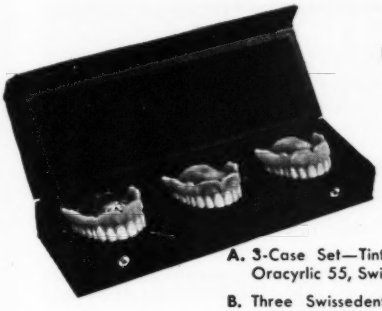
From this wide selection of materials and types of construction, you can present almost any type of restoration and variations in fees, making it easier for your patient to choose.

A Complete Dental Laboratory Service
Unlimited in Scope
Unsurpassed in Quality

HENRY P.
BOOS
DENTAL LABORATORIES, INC.

Pays Dividends

YEAR after YEAR



BOOS *Full Denture* 3-CASE STANDARD DEMONSTRATING SET

Includes Tinted Base, Cast Vitallium Palate with Oracrylic 55, Plain Pink Acrylic and display case $39.75

Tinted Base Denture Only . . . $17.00

Also available:

A. 3-Case Set—Tinted Base, Cast Vitallium Palate with Oracyrlic 55, Swissedenture and display case. . . . $54.75

B. Three Swissedentures—young, middle-aged and old, masculine or feminine with display case $67.50

C. Two Swissedentures—masculine and feminine with display case. $49.50

USE THIS COUPON TO INVEST IN BIGGER DIVIDENDS FOR THE FUTURE

HENRY P. BOOS DENTAL LABORATORIES, INC.
808 NICOLLET AVENUE, MINNEAPOLIS 2, MINNESOTA

Please send me the following:

Complete 6-Case Partial Demonstrating Set	$122.50 ☐
Upper Half (3 Cases)	$ 62.50 ☐
Lower Half (3 Cases)	$ 62.50 ☐
Complete 8-Case Partial Demonstrating Set	$189.50 ☐
Upper Half (4 Cases)	$ 95.00 ☐
Lower Half (4 Cases)	$ 95.00 ☐
Standard 3-Case Full Denture Set	$ 39.75 ☐
Combination A—3-Case Set	$ 54.75 ☐
Combination B—3 Swissedentures	$ 67.50 ☐
Combination C—2 Swissedentures	$ 49.50 ☐

Check Enclosed ☐ Send C.O.D. ☐

DOCTOR_____

ADDRESS_____

CITY_____ STATE_____

808 NICOLLET AVENUE • MINNEAPOLIS 2, MINNESOTA

Branch Laboratories: *Medical Arts Bldg., Duluth, Minn.* • *Equitable Bldg., Des Moines, Iowa*

LAFFODONTIA

She: "Is your horse going to race in the Grand National?"

He: "No, they wouldn't let him because he was scratched in the Preakness."

She: "My, my, and that's such a tender place."

* * *

Wee Willie Wilkins, five feet tall
Came home plastered from a ball,
Now though Willie's small, his wife's
big and tall,
And Willie's still plastered—on the
wall.

* * *

Then there was the fellow who thought that a space maintainer was something that held a satellite in orbit.

* * *

If your wife wants to learn to drive —don't stand in her way.

* * *

"My girl got sick eating cantaloupe."

"So what?"

"Now she's my melon colic baby."

* * *

"This is a holdup! Give me your money or else."

"Or else what?" demanded the victim.

"Don't confuse me," said the thug. "This is my first job."

* * *

Boss — "Please see to it that I am not disturbed this morning."

Steno — "Yes sir. I'll keep my knees covered."

* * *

Boss — "What are you doing here? I thought I fired you ten days ago."

Service Manager — "Righto, I just came back to see if you were still in business."

If you can start on an auto tour with the certainty of knowing where you're going . . .

Or if you don't have to stop every five minutes to look at your gas and oil . . .

Or if you make every turn and detour correctly, according to your maps . . .

Or if you are driving along at just the right speed for comfort and safety . . .

Or if you're certain that there isn't a squeak or a rattle in the old bus . . .

Look around, old top; she's either asleep or she's fallen out somewhere.

* * *

Only a woman can rave over a pair of nylon stockings when they're empty.

* * *

Hangover: *When the brew of the night meets the cold of the day.*

Temperamental: *Easy glum, easy glow.*

Bridegroom: *A wolf who has just paid for his whistle.*

* * *

The lion ate the bull. He felt so good he roared and roared. The hunter heard him and shot the lion. The moral of this story is: When you're full of bull keep your mouth shut!

* * *

A motor jockey was bragging that he was an expert on drinks, both soft and hard. One of his fellow workers walked over to a corner and returned with a bottle of liquid. "Take a swallow of this," he challenged, "and tell me what it is."

The windy guy took a swig and gasped, "That's gasoline!"

"I know," the other fellow agreed, "but is it premium or regular?"

Good preventive dentistry starts with prophylaxis treatment...

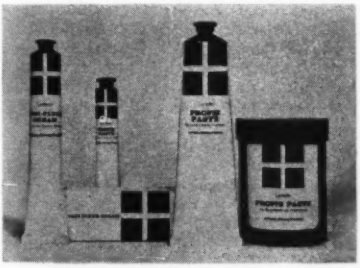
PROFIE® prophylaxis gives better results...

Diagnosis is aided when all calculus, stains, and deposits are thoroughly removed . . . for clearer interpretation of x-rays and more accurate estimates of work to be done. Profie prophylaxis is most effective as a diagnostic adjunct.

Irritation is checked and local infection deterred by scaling all traces of gingival and subgingival calculus . . . vital first stages in treating gingivitis and periodontitis. Profie prophylaxis helps accomplish these indispensable scaling procedures safely, more easily, and faster.

Periodontial damage is inhibited when residues as well as gross deposits are eliminated . . . thus curbing a major factor in tooth loss. Profie prophylaxis utilizes superfine ingredients which assist efficient cleaning and polishing of crowns and accessible root surfaces.

Dental hygiene is improved because a thorough prophylaxis treatment encourages the patient to keep his teeth looking better. Profie helps create the maximum aesthetic values that naturally lead to proper oral health habits.



For the most effective caries control treatment you can use, follow Profie prophylaxis with topical sodium fluoride application of Topi-Fluor® Cream — a simple, clinically supported two-step procedure.

Order from your dental dealer today: Profie Brand original enzyme-action prophylaxis materials — for safe, selective calculus breakdown . . . easier instrumentation and less patient trauma . . . minimum spatter — in convenient choice of stable, ready-to-use paste in tubes or jars . . . or easy-to-mix tablets and liquid.

WHAT'S NEW

IN PRODUCT DESIGN— FUNCTION—ASSORTMENT

The purpose of this department is to provide a convenient, up-to-date source of new product information from data provided by manufacturers. You may obtain additional information by writing to them. Listing does not imply Oral Hygiene's endorsement.

Professional Towels—Kay-Pees now packaged in self-dispensing packages. Available in white or green. The Sorg Paper Co., Middletown, Ohio.

Dental Homostat — Hemo-Gel for dental hemostasis. Consists of block of sterile gelatine sponge. Available in two forms; plain or medicated. Novocol Chemical Manufacturing Co., 2911 Atlantic Ave., Brooklyn 7, N.Y.

Kromask, for Shade Control—Designed to eliminate the problem of shade control with facings on chrome alloy cases. Application is simple. Requires no heat. Columbus Dental Manufacturing Co., 634 Wager St., Columbus, Ohio.

Air-Cleared Mouth Mirror—Air flows automatically onto face of mirror from an oriface in handle. Light weight. Chrome finished. Remains clear in all conditions. Surgident, Ltd., 2124 So. Sepulveda Blvd., Los Angeles, Calif.

Hypodermic Needles—Gliding bevel, drag-free design. Stainless, rustless, seamless. Parkell Co., 23-06 Thirty-First Ave., Long Island City, N.Y.

Jet Blow Torch—Pen-sized. Designed for the dental laboratory or the hobby shop. William Dixon, Inc., 32 East Kinney St., Newark, N. J.

Adjustable Condylar Articulator — For protrusive and lateral excursions. Fully adaptable incisor guide. A model available for every technique. Hanau Engineering Co., Inc., 1233 Main St., Buffalo, N.Y.

Carbide Bur Assortment — Includes 24 plain, 12 fissure, Lucite bur stand. Available in friction grip, tapered shank and latch type. 12-bur assortment also available. Emesco Dental Co., 150 Fifth Ave., New York City.

X-Ray Apron—For patient. Protection equivalent to full 0.5 mm lead at 85 kvp. Increases gonadel protection of patients of every stature. X-Ray Department, General Electric Co., Milwaukee, Wis.

Inlay Furnace—Inside muffle measures 3" x 3" x 3⅜". Accommodates four average inlays. Maintains temperature up to 1600° F. Several new control features. J. F. Jelenko, Inc., 136 West 52nd St., New York City.

Camera for Professional Use—Pinpoint vision provides for close-up dental photography. Exposure setting automatic. Single diaphram adjustable. Working distance 4" to 16". Utilizes tiny flash bulbs. Especially designed for case records, clinical studies, etc. Medical Division, Eastman Kodak Co., Rochester, N.Y.

Improved Nupons — Cusps designed to 33° to function with any 33° tooth. Self-cleaning cusps. Higher proximal joints. Other features for improved

His dentist recommends

Amm-i-dent®

because . . .

Clinical tests with children in his age group show Amm-i-dent will reduce caries *approximately one quarter*.[1,2] Amm-i-dent has proved effective for users of all ages—as reported in seven published clinical studies.

The synergistic action of high urea and SLS keeps teeth and plaque above the cariogenic pH of 5.5 for more than 24 hours after a single brushing.

In addition, patients like Amm-i-dent's fine cleansing qualities and its new, pleasant foaming action and pleasing taste.

1. J.A.D.A. *49*:185, 1954
2. J. Dent. Children *24*:237, 1957

BLOCK DRUG COMPANY, INC.

105 ACADEMY STREET JERSEY CITY 2, NEW JERSEY

RECOMMENDED BY MORE DENTISTS THAN ANY OTHER DENTIFRICE

function and appearance. Julius Aderer, Inc., 21-25 Forty-Fourth Ave., Long Island City, N.Y.

Veneer Retention — Kit of Veneer-Lock consists of bottle liquid and bottle of Plastic Beads. A simple technic for veneer retention. George Taub, Inc., 2824 Hudson Blvd., Jersey City, N. J.

Ultrasonic Cleaning Device — For cleaning polishing agents, and other foreign matter from bridgework, chromework, models, dies, etc. Whaledent, Inc., 303 Kingston Ave., Brooklyn, N.Y.

Massage Dental Seat—Fits any dental chair. Provides soft, gentle massage to relax patient. Massage-A-Matic Corp., 4901 Gaylord, Denver, Colo.

Die Making Material — Micra-Die, especially compounded for rubber base materials. Has special features of denseness, hardness, accuracy. Dental Perfection Co., P. O. Box 4217, Glendale, Cal.

Cold-Cure Acrylic—New Hygienic formula eliminates yellow tinge. Prevents initial yellow or orange cast. Several special features: color stability, strength, density, etc. Hygienic Dental Manufacturing Co., 1245 Home Ave., Akron, Ohio.

Plastic Film Mount—Reusable film mount. Separate pocket for each film. All corners and edges of film are visible. Pockets formed by black mount and clear plastic window. Other features described; time saving, visability, economy. Coe Laboratories, Inc., Chicago 21, Ill.

Airotor Model B—Water, air and lubrication delivered to handpiece in concentric hoses. Exclusive lubrication device. Quick removal or attachment of handpiece. Air filter removes particle down to four microns. The S. S. White Dental Manufacturing Co., 211 So. 12th St., Philadelphia 5, Pa.

Air Compressor—Model No. 3. Capacitator type. ASME approved tank. Pressure 55 lb. p.s.i. Height 25", Dia. 16". The S. S. White Dental Manufacturing Co., 211 So. 12th St., Philadelphia 5, Pa.

Total Vision Light—Glare-free and as nearly heat-free as possible. Provides correct optometric ratio of general lighting to balance the dental spotlight. No-Cal Co., 2958 Carrizo Lane, Dallas 29, Texas.

Den-Tal-Ez Chair — All-electrically operated with controls mounted on back. Back massage unit and seat massage operate independently. Comfa Lounge Chair Co., 1015 East 14th St., Des Moines, Iowa.

Hydra/Press — For speedy, efficient flask closing. Compensating springs maintain proper pressure during curing. Handler Manufacturing Co., Garwood, N. J.

Breath Spray—Pleasant tasting, effective, and the 15cc unit contains sufficient spray for over 250 applications. Graham Chemical Corp., 129-21 Merrick Blvd., Springfield Gardens, N.Y.

Equalizer Moore Mandrel Type—For brass center discs. Cushioning effect enables operator to smooth, disc, and polish with a light feather-touch. May be quickly attached or detached. Daleco Co., 1068 Mission St., San Francisco, Calif.

Elastic Impression Material—A pink material assuring greater accuracy, convenience, and longer shelf life. Needs no fixing. Claudius Ash, Sons & Co., U.S.A., Inc., 2730 Pine Ave., Niagara Falls, N. Y.

Prosthodent—A pure-white blend of safe, vegetable gums that form an elastic-like cohesive denture cushion. Cannot gag, nauseate or work out from dentures. Convenient shaker contains 60-day supply. Prosthodent Co., Box 682, Glendale, Calif.

LISTERINE ANTISEPTIC is effective two ways in dental procedures

1. **Low surface tension** (about ½ that of water) enables Listerine to penetrate the tiniest oral crevices and flush out mucus and oral wastes that harbor bacteria.
2. Listerine's *effective and rapid antiseptic action* reduces bacteria in the mouth as much as 96.7% within 15 minutes, enabling you to work in a clean field. By killing protein-fermenting bacteria, Listerine also stops most bad breath instantly and usually for several hours.

And Listerine is preferred by your patients.

In their own homes more men and women use Listerine Antiseptic than any other mouthwash. Latest reports show Listerine is preferred by almost 4 to 1 over the next most popular brand!

Your patients will welcome the familiar brisk taste of Listerine when used as a rinse at your chair. They will appreciate the way Listerine leaves their mouths feeling tingling clean.

SPECIAL OFFER TO DENTISTS ONLY—
PROFESSIONAL GALLON SIZE $2.50

Fill out the coupon below and send it in with your professional card and check or money order for $2.50 made out to Lambert Pharmacal Company Division and receive prepaid a full gallon of Listerine Antiseptic.

Mail to: Professional Service Dept. (108G). Lambert Pharmacal Company
Div. of Warner-Lambert Pharmaceutical Company, Morris Plains, N.J.

*Dr.*_____

*Address*_____

*City*_____ *Zone*_____ *State*_____

a complete answer
to the better management of

DENTAL PAIN

FIRST, the degree of pain—whether mild, moderate, severe or excruciating—may be determined.

SECOND, the appropriate form of *Phenaphen* or *Phenaphen with Codeine* may be prescribed.

In each form, a true pharmacodynamic synergism of the ingredients, presented in safe, conservative dosage, enhances their analgesic potency.

PHENAPHEN
— basic non-narcotic formula
Each brown and white capsule contains:
Acetylsalicylic acid ..... 162 mg. (2½ gr.)
Phenacetin ..... 194 mg. (3 gr.)
Phenobarbital ..... 16.2 mg. (¼ gr.)
Hyoscyamine sulfate ..... 0.031 mg.

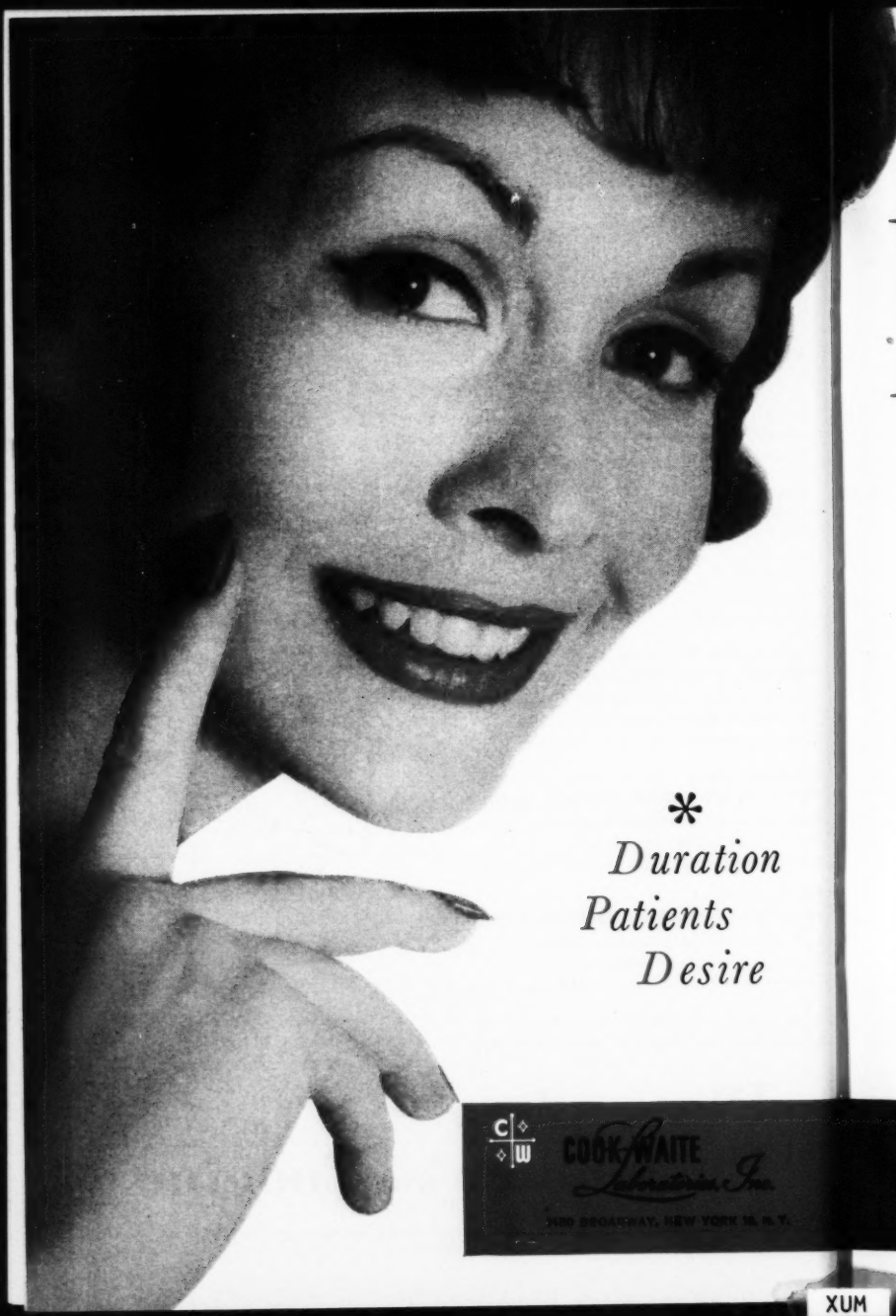
Phenaphen No. 2
PHENAPHEN WITH CODEINE PHOSPHATE ¼ GR.
Each black and yellow capsule contains:
The basic Phenaphen formula plus
Codeine phosphate ..... 16.2 mg. (¼ gr.)

Phenaphen No. 3
PHENAPHEN WITH CODEINE PHOSPHATE ½ GR.
Each black and green capsule contains:
The basic Phenaphen formula plus
Codeine phosphate ..... 32.4 mg. (½ gr.)

Phenaphen No. 4
PHENAPHEN WITH CODEINE PHOSPHATE 1 GR.
Each green and white capsule contains:
The basic Phenaphen formula plus
Codeine phosphate ..... 64.8 mg. (1 gr.)

A. H. ROBINS CO., INC. · Richmond 20, Va.
Ethical Pharmaceuticals of Merit since 1878

Phenaphen® Robins
Phenaphen® with Codeine


*
Duration
Patients
Desire
C W
COOK-WAITE
Laboratories Inc.
NEW YORK 16, N. Y.

Now... for high-speed procedures, use the anesthetic with

DPD*

Yes... patients *do* desire a duration of anesthesia that keeps them comfortable while you do your unhurried, meticulous job... but then doesn't linger unnecessarily long after you've dismissed them.

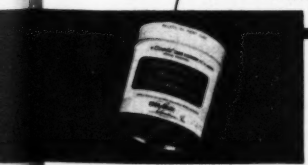
In fact, isn't that *precisely* the type of duration you, too, desire? Not so short that you have an agitated patient requiring reinjection... not so long that you have a patient disgruntled by protracted paraesthesia.

That's the duration you get with RAVOCAINE HCl 0.4% and NOVOCAIN 2% with NEO-COBEFRIN 1:20,000 and, of course, you also get these other fine features for which this solution is acclaimed:

- ***Extremely Fast Onset***
- ***Unprecedented Depth***
- ***Unsurpassed Tolerance***

Go ALL Modern—Order your supply today in standard or short size cartridges.

RAVOCAINE* HCl AND **NOVOCAIN***
Brand of propoxycaine HCl *Brand of procaine HCl*
WITH **NEO-COBEFRIN***
Brand of levo-nordefrin



AMERICAN DENTAL ASSOCIATION 100 YEARS 1859 1959

* NEO-COBEFRIN, NOVOCAIN AND RAVOCAINE are the trademarks (Reg. U. S. Pat. Off.) of Sterling Drug Inc.

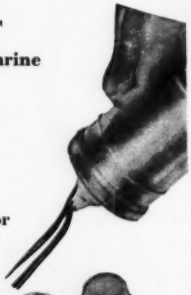
WESTWOOD
RETRACTION KIT
for a better impression

WESTAT
Racemic Epinephrine

Dispensed from Plastic Dropper Bottle

Sanitary

Prevents Waste or Contamination



CONTENTS:

Medicated Fibers
Alum—cut
Zncl 8—cut
Zncl 40—cut
Unmedicated Fibers
Cord 24—cut
Cord 16—spool
Cord Pl—cut

WESTAT 8% and 2% Racemic Epinephrine

Items may be purchased separately—

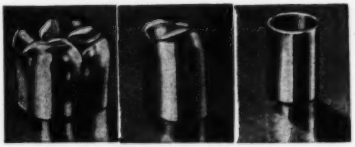
ASK YOUR DEALER OR WRITE FOR FURTHER INFORMATION

Westwood Dental Mfg. Co.
2019 Pontius Ave., Los Angeles, Calif.

Please send complete information.

Dr. .....
Address .....
City .....
Dealer's Name .....

CROWNS



Preformed
STAINLESS STEEL CROWNS:
Bicuspids & Molars anatomically shaped, circumference marked in mm.
Compartmented Box of 100 pc.—bx. $26.00
10 pc. Refills . . 3.50

Prefabricated
ALUMINUM CROWNS:
Bicuspids & Molars, circumference marked in mm.
Compartmented Box of 100 pc.—bx. $15.80
10 pc. Refills . . 1.75

ALUMINUM SHELLS:
Numbers stamped on each shell—sizes according to USA standard No. 1—20
Available in boxes of 100 pieces—1 box. . $4.80

COPPER BANDS:
High gloss polished, marked top & bottom in mm circumference. On cutting one end the marking is clearly indicated on the other end, seamless, available annealed or hard.
Assortments of 100 pieces 17—40 mm
1 assortment . . $3.—

MEDIDENTA
1420 Sixth Ave. New York 19, N. Y.

DENTAFLUOR®
Sodium Fluoride

Home and school fluoridation tablets. Tested over 8 years . . . Join the swing to tablets. Thousands shipped all over the world. It's an easy way to fluoridate "Dentafluoridate." Write for complete information on home and school fluoridation. Send $15 for (dentist's) special pack of 12 bottles of 100 tablets each (retail price, $3 per bottle). As you dispense each bottle at the chair you realize over 100% profit.

Or, ask your druggist to stock Dentafluor® for B use. Available in bottles of 1000 for $12; 500 for $6.50.

We test private water for F. Send 4-oz. sample and $3. Give the farmer's kids a chance too. They are young only once

DENTAFLUOR®
P.O. Box 487 Ogden, Utah

THERE IS ONLY ONE

Aristaloy

LOOSE MICROGRANULES OR ONE-SPILL-PILLS

Aristaloy in One-Spill-Pills take no longer to amalgamate since they are the regular selected assortment of Aristaloy particles (with nothing added) lightly pressed together for quick, easy proportioning.

Each Pill requires one Spill of Mercury from the Baker Adjustable Dispenser.

Ask your Dealer for a Pre-Proportioned Combination 10 ounces of Aristaloy in One-Spill-Pills, complete with Mercury Dispenser.

Are you continually experimenting with new unproven alloys, while *proven* Aristaloy is conveniently available.

ENGELHARD INDUSTRIES, INC.

BAKER DENTAL DIVISION

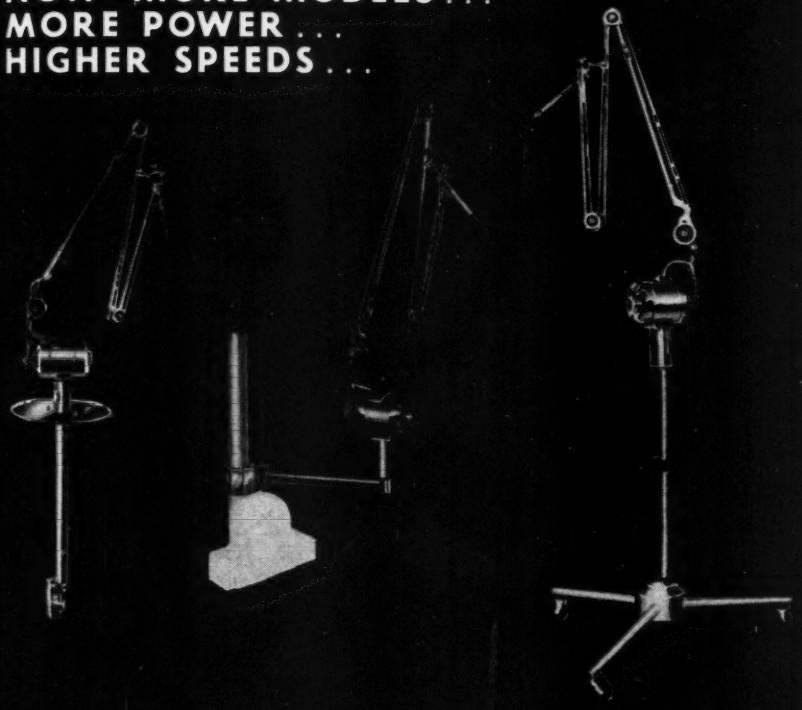
850 PASSAIC AVENUE • EAST NEWARK, NEW JERSEY

NEW YORK CHICAGO LOS ANGELES SAN FRANCISCO

BAKER

THE WORLD'S LARGEST WORKERS AND REFINERS OF PRECIOUS METALS

NOW—MORE MODELS . . .
MORE POWER . . .
HIGHER SPEEDS . . .



New EMESCO Series "N" Auxiliary Engines

Now more models than ever to choose from . . . regular or high speed—bench, floor, wall, unit mounted or Unette mounted.

Now 20% more powerful . . . regular speed models increased from 1/10 to 1/8 HP—high speed models now a full 1/6 HP, with all ball bearing arms.

Now the widest speed range available . . . 2500 to 14,000 RPM with regular speed models—3000 to 34,000 RPM with high speed models, and up to 130,000 RPM with Page-Chayes type handpiece.

Ask your dealer—or write for detailed literature

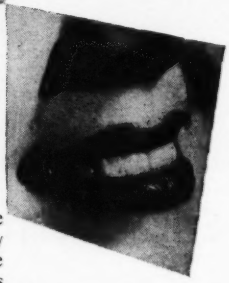
Emesco

EMESCO DENTAL CO.

150 FIFTH AVENUE, NEW YORK 11, N. Y.

IN CONSIDERING
CARIES ETIOLOGY . . .

the form of foods consumed is paramount



Dental researchers find that liquids . . . because they pass quickly through the mouth and leave only minimum residue on gums or teeth . . . provide little opportunity for harmful action by enzymes present. (1) (2)Thus proved to have virtually no relationship to oral conditions involved in the acidogenic theory, soft drinks may be fully enjoyed. Their taste appeal encourages liquid intake. They provide quick energy pickup and ready refreshment, which is their primary purpose.

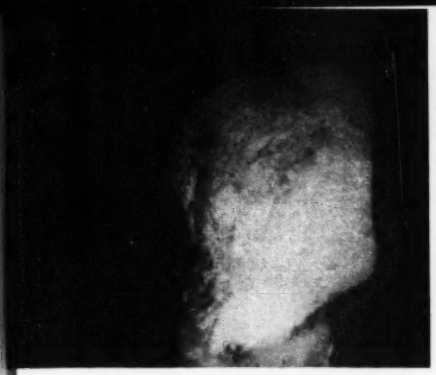
American Bottlers of Carbonated Beverages

Washington 6, D. C.

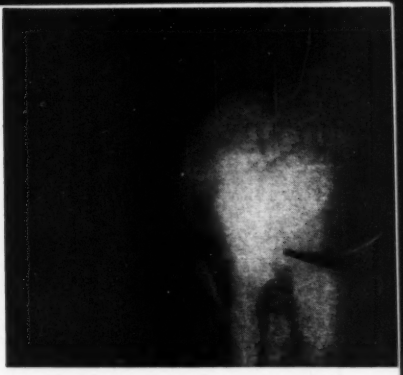
The National Association of the Soft Drink Industry

(1) Bibby, B. G. Effect of Sugar Content of Foodstuffs on their Caries-Producing Potentialities. J. Am. Dent. A., *51*:293 (Sept.) 1955.

(2) Ludwig, T. G., and Bibby, B. G. Acid Production from Different Carbohydrate Foods in Plaque and Saliva; Further Observations Upon the Caries-Producing Potentialities of Various Foodstuffs. J. Dent. Research, *36*:56 (Feb.) 1957.



Extracted molar with gross stain, calculus, cervical erosion, caries



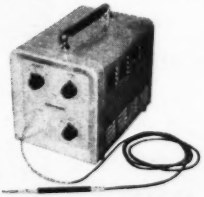
The same tooth after cleaning with the Portable Prophylaxis Unit

RAPID METHOD FOR PROPHYLAXIS AND CALCULUS REMOVAL

• Complete prophylaxis and deep scaling is now routinely done in one sitting by users of the Cavitron "30" Portable Prophylaxis Unit, with a saving of up to 50% in chair time.

Effortless

Instead of fatiguing hand instrumentation, the operator merely *guides* the lightweight handpiece along the tooth, quickly dislodging subgingival and supragingival calculus. Stubborn surface stain, so resistant to conventional procedures, is also easily removed. Crown and root surfaces are left velvety smooth.



The Unit is fully portable, can be installed in minutes. Supplied with basic set of prophylaxis tips; tips for amalgam condensation, gingivectomy and root canal therapy also available

Clear Field

A continuous water spray washes away debris, maintaining a clean, clear field. *No abrasive is used.* Vision is good; ready access to all areas is provided by quick-snap-in tips available for use with the Unit.

Gentle

Patients report that the procedure is extremely gentle, with complete absence of unpleasant scaling sensation. Tissue laceration, bleeding and postoperative sensitivity are virtually eliminated.

Private Demonstration

For information on a demonstration in your office by your local Cavitron dealer, mail the coupon below—now.

CAVITRON EQUIPMENT CORP.
42-26 28 St., L.I. City 1, N. Y.

☐ Yes, I would like a demonstration.

☐ Please send literature.

O.H. 2

Dr. .....

Address .....

.....

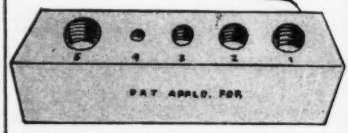
Dealer .....

NEW! UNION BROACH AIR-TURBINE MAINTENANCE KIT

for

BORDEN AIROTOR

Pat. app. for
Copyright 1958



NOW . . . DO IT YOURSELF . . .

Save $85. or more per year!

Maintenance worries disappear with the use of the "Union Broach Air Turbine Maintenance Kit."

This simple to use maintenance kit enables you to:

1. Change bearings in only two minutes.
2. Maintain perfect fit of Turbine Cartridge in handpiece.
3. Obtain maximum efficiency from handpiece.
4. Clean Turbine regularly.
5. Eliminate most service calls.

All replacement bearings are of 440 C Stainless Steel and are completely tested before delivery.

PRICES:

The Air Turbine Maintenance Kit consists of: Set of Tools and 3 Sets of 2 Bearings **$60.00**

After initial expense for tool the change-over refills of bearings are: Package of 3 Sets of 2 Bearings **$36.00**

Package of 1 Set of 2 Bearings **$15.00**

Descriptive Literature sent upon request.

Ask Your Dealer For A Demonstration

UNION BROACH CO., INC.
80-02 51st AVENUE, ELMHURST 73, N. Y.

FINE RAISED PRINTING

Standard 2 x 3½ on No. 1 grade featherweight, black ink only. 7 lines ordinary composition. Send sample or copy, enclose check or money order.

Take advantage of our get-together offer.

Printers for the Medical and Dental Profession for over 50 years. Send for our complete professional printing catalogue, mailed to you free.

MEMO PRINTING CO.
428 SOUTHERN BLVD., NEW YORK 55, N. Y.

SHUR GRIP

stops BELT SLIP

REDUCES VIBRATION

STEPS UP SPEED

ELIMINATES FRICTION

SAVES TIME AND MONEY

(ACTUAL SIZE)

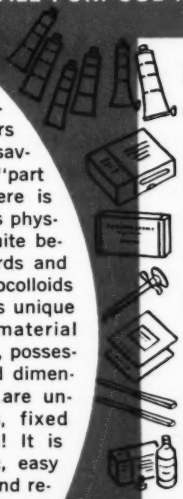
Order from your dealer

CASNOR DENTAL PRODUCTS, CO.
Taft, California

New User SPECIAL

COE-FLEX

THE ALL-PURPOSE RUBBER IMPRESSION MATERIAL



Here's your opportunity to join the thousands of happy users of Coe-Flex—at real savings. If Coe-Flex is "part of your practice" there is no need to tell you its physical properties are quite beyond existing standards and specifications of hydrocolloids and alginates . . . This unique rubber impression material "cures" in the mouth, possesses the accuracy and dimensional stability that are unequalled for inlays, fixed bridges, and partials! It is strong, tough, elastic, easy to use, correctible—and requires no fixing or special equipment. Coe-Flex is the material you've always hoped to obtain. Call your dealer today.

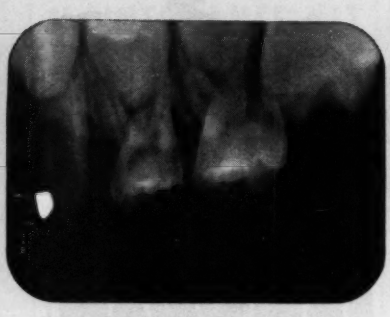
Contact your dealer today

3 Pkg's COE-Flex: 2 Reg. and 1 Injection Type	$11.00 5.50
1 Prof. Pkg. Coe Tray Plastic, Reg. or Fast Setting	7.50
1 Box of 100 COE-Flex Copper Shells	8.50
1 COE-Flex Syringe	8.00
2 Coe Mixing Pads	1.20
2 Coe Stainless Spatulas	2.50
1 Bottle Coe Paste Remover	2.00
VALUE	$46.20
"NEW USER" SPECIAL	39.75
YOU SAVE	$ 6.45

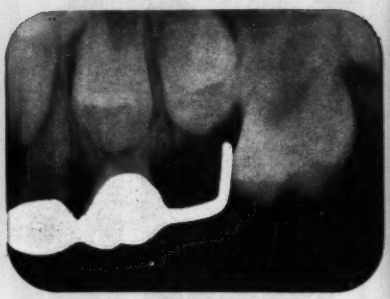
Prices for U. S. A. only

COE LABORATORIES, INC., Chicago 21, Illinois

ATYPICAL ROOT RESORPTION



Atypical root resorption—upper right second primary molar. Ectopic eruption—upper right first permanent molar. *Age—seven years, eight months.*



One-piece cast space maintainer after removal of upper right second primary molar. *Age—seven years, 10 months.*

No mystery...

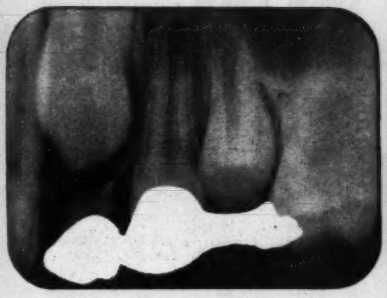
As your patients' dental adviser, you are concerned with finding answers to their dental problems. To do so, you make radiographic examinations—as many as you feel are needed . . . periapical, occlusal and extraoral. Naturally, you stress *quality* rather than *quantity;* this saves your time, and your patients' time; it assures *more* information—*less* radiation!

There's nothing unusual about this. In fact, it is the reason *why* more and more dentists are specifying Kodak x-ray materials. Not only is Kodak dental x-ray film *faster,* but film and chemicals are *made to work together*—made to produce uniform, dependable results *when used together.*

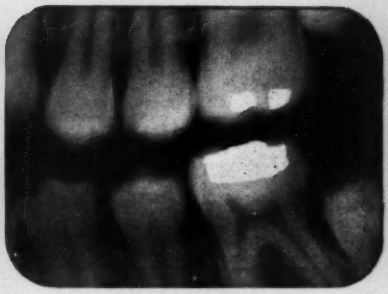
NEW EDITION READY NOW. Get first 50 copies of "How to Prevent Toothache," by Howard R. Raper, D.D.S., without cost. Additional copies, $1 per 100. See that your patients see this revised 14-page booklet.

EASTMAN KODAK COMPANY

X-ray Division
Rochester 4, N. Y.



Second one-piece cast space maintainer for upper right second primary molar after guided eruption of upper right first permanent molar. *Age—nine years, one month.*



Note normal occlusion of permanent dentition. *Age—twelve years, nine months.*

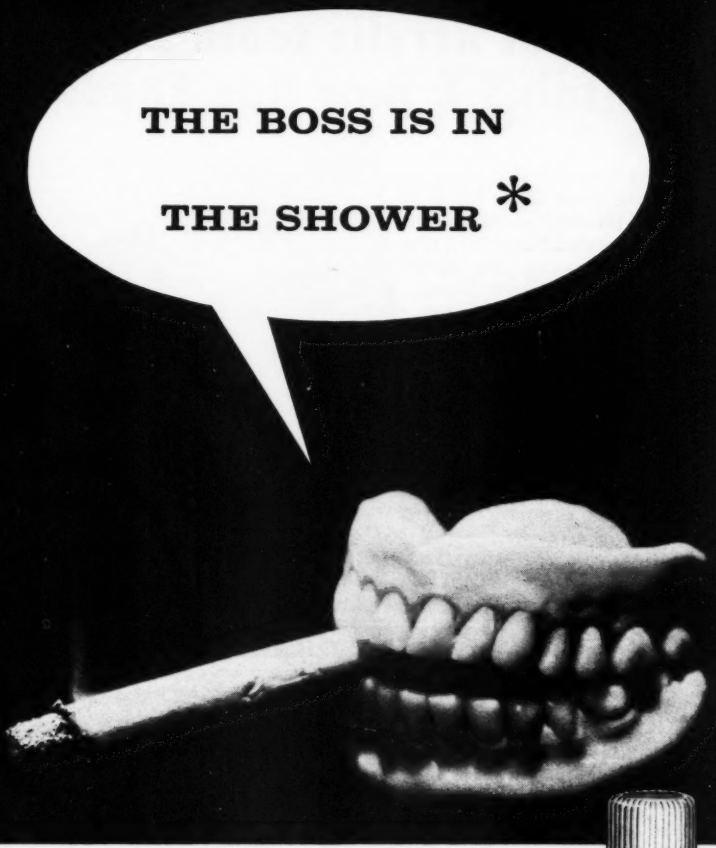
just common sense!

FOR *MORE* INFORMATION . . . *LESS* RADIATION . . .

To reduce radiation reaching patient and operator; to assure better radiographs, less "blurring" from movement . . .

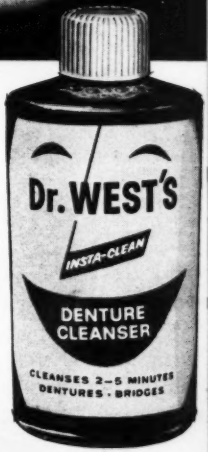
1. **Use the faster Kodak dental x-ray films.**
2. **Reduce exposures to recommended minimums.**
3. **Process in Kodak dental x-ray chemicals.**

Order Kodak dental x-ray materials from your dental dealer.



*Submitted by Dr. M—, Philadelphia, Pa., in the recent "Happy Denture" Contest.

To keep your patients' dentures "Happy", recommend Dr. West's *INSTA-CLEAN** Denture Cleanser. The newest idea in the field, this effective liquid goes into solution instantly, loosens gluco-proteid film, tobacco stain, and tartar-forming substance in 2 to 5 minutes. Tests a safe pH7. Has lower surface tension than any denture cleanser on the market. Write for free samples.



DR. WEST'S *INSTA-CLEAN* **DENTURE CLEANSER**

Weco Products Co., Inc., 20 N. Wacker Drive, Chicago 6, Illinois

**INSTA-CLEAN* is the trademark of Weco Products Company*

New Jet Acrylic tooth shade kit contains 6 New Hue Shades...

Lang's new self-curing Jet Acrylic tooth shade kit is the most practical of its kind... you have six different New Hue Shades plus one 120cc bottle of Jet Liquid in one convenient package. Lang's self-curing Jet Acrylic is supplied in all New Hue Shades and is ideal for producing instant jacket crowns, facings, partials etc... ask your dealer now or write to...

Standard package contains New Hue Shades 61, 62, 65, 67, 77 and 81. Custom packs are available to meet individual requirements . . . at no extra cost.

Lang

LANG DENTAL MFG. CO.
828 W. Montrose Ave. • Chicago 13, Illinois

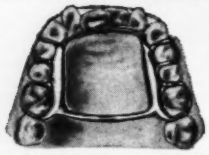
HEADREST COVERS
1 Dozen and Two Foam Rubber Pads
$2.00
(White or Green)

REGAL PLASTIC PRODUCTS

LAB APRONS— for doctor or technician
PROPHY APRONS— for doctor or hygienist
CAPES— for complete patient protection
$1.50 Each (Clear or Green)

BIBS
for average patient protection
(Clear or Green)
.75 Each

REGAL DENTAL CO. 499 ALABAMA AVE. BROOKLYN, N. Y.



JACKSON REMOVABLE ORTHODONTIC APPLIANCES
FOR GENERAL PRACTITIONER AND ORTHODONTIST

24 YEARS EXPERIENCE
WRITE OR PHONE FOR DETAILS
JOHN E. HERMAN
101 W. 42 ST. • NEW YORK 36, N. Y.
Phone LONGACRE 3-3043

APPLIANCES FURNISHED ON DENTIST'S PRESCRIPTION

SUPER-CAINE

(Gan-Aiden) TOPICAL ANESTHETIC

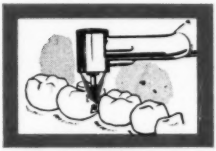
- FAST ANESTHETIC ACTION
- DEEP PENETRATION
- NO NEEDLE PUNCTURE PAIN
- NO PAINFUL INSTRUMENTATION DURING SCALING OF TEETH
- REDUCES PATIENT'S FEAR

- Super-Caine Ointment for Post Extraction Pain.
- Prevents Dry Sockets.
- Promotes Healing.
- For Use with New Dentures.
- Relieves Sore Spots.

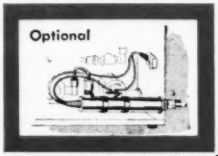
ORDER THRU YOUR DEALER
FANTAZN LABORATORIES
P. O. Box 208 Preuss Station, Los Angeles 35, Calif.

Aero DENSCO Turbex

HANDPIECE LIGHT... one of the greatest advancements in dentistry—light without shadows!



DUAL WATER STREAM... provides ample irrigation regardless of cutting instrument position!



WATER HEATER... maintains a comfortable, continuous supply of body-temperature water at the handpiece!

Due to the fast growing acceptance of the DENSCO Aero-Turbex by dentists purchasing air turbines, increased quantity production has now made possible a price reduction.

At this new reduced price... offering more outstanding features than any other turbine... you will find the DENSCO Aero-Turbex to be the best turbine buy on the market!

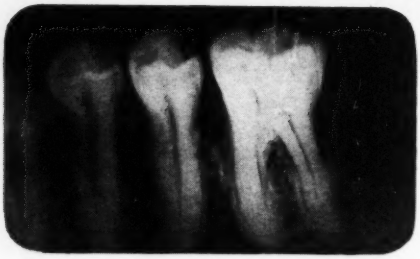
* Dentists purchasing Aero-Turbex units with two handpieces receive a special discount on the second handpiece. Also, dentists who have already purchased Aero-Turbex units, can now purchase a second handpiece at a special price. See your DENSCO Dealer.

DENSCO

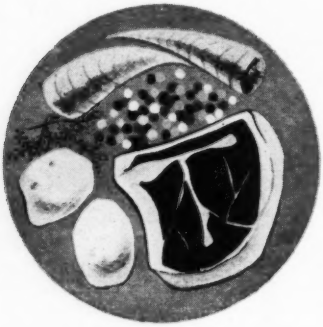
TRADE MARK REG.U.S.PAT.OFF.

DENSCO, *Incorporated*

DENVER, COLORADO



BECAUSE ORAL HEALTH



BEGINS WITH NUTRITION...

GEVRAL CAPSULES

Vitamin-Mineral Supplement Lederle

14 vitamins—11 minerals . . . broad supplement to offset nutritional deficiencies often first manifest in dental disorders and, thus, frequently subject to first diagnosis by the dentist. Economical, completely acceptable, once-a-day dosage, oil-free, powder-filled.

In attractive Jubilee Jar of 100, and bottles of 30 and 250.

LEDERLE LABORATORIES, A Division of AMERICAN CYANAMID COMPANY, Pearl River, New York

Lederle

Prompt action

Satisfactory results

PHOSPHO-SODA®

Many dentists find that Phospho-Soda (Fleet) is an excellent means of cleansing the intestinal tract of mucus, blood or pus ingested post-surgically.

Suggested adult dosage: As a mild eliminant, one tablespoon Phospho-Soda (Fleet) in a glass of cold water, preferably before breakfast. Follow with additional water.

Professional samples and standard post-extraction forms on request

since 1869 Fleet

C. B. FLEET CO., INC.
Lynchburg, Virginia

TURN SCRAP INTO PROFIT . . . *Send us your scrap amalgam.* In exchange, we'll send you an equal weight of our Triple Distilled C.P. Dental Mercury or an equal value of our Oceanic Filling Alloy. *Guaranteed to meet A.D.A.* Specifications. Send card for our price list today.
OCEANIC CHEMICAL CO., 407 Sansome St., San Francisco 11, Calif.

BUY SECURITY BONDS

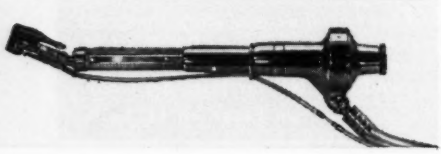
---

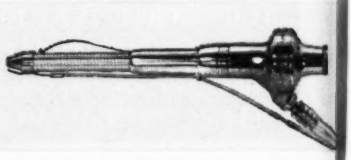
you're right with... *KERR CRISTOBALITE ...the great world leader in Cristobalite investments!

New Dentalair Unit does all with greatest patient comfort!

Eliminates need for belt-driven equipment!

Here's the new Dentalair Unit—the only high-speed unit that completely replaces old-fashioned belt-driven equipment! Featuring two separate handpieces and finger-tip control of torque and turbine speed (0 to 175,000 rpm), Dentalair lets you perform every operative procedure in strict classical manner. What's more, the combination of high speed and precision engineering of every part provides operation so smooth your patients simply cannot feel vibration. There's no harsh buzz or whine, no frightening arms or pulleys. Result: You do more work faster and your patients are more comfortable—when you use Dentalair! Check the features described here, and then write for complete literature and the name of your nearest dealer. Address: Dept. OH-4.



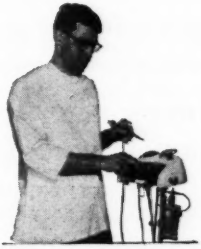


Only high-speed unit with two handpieces and finger-tip control for complete versatility and less operator fatigue!

Nothing else to buy—Dentalair comes complete with separate straight and contra-angle handpieces that take all your standard shank burs, discs, wheels, stones, diamonds and carbides. Use them to do all your operations—preparing and polishing amalgams and gold inlays; making porcelain jacket preparations and full crowns; grinding and polishing metals, acrylics, and porcelain teeth in bridges; even prophylaxis; without resorting to belt-driven equipment.

Best of all, you need learn no new techniques. No stroking, no brushing necessary, since both torque and speed are controlled by a touch of your finger, providing full tactile perception. At the same time, you cut backache and general fatigue, since you don't have to stand with one foot jutting out to control a rheostat! Try Dentalair for yourself—at your next convention. Or, write for the name of your nearest dealer, who will be happy to arrange a demonstration.

operative procedures



Dentalair offers every feature you want and need:

High speed—for rapid, efficient cutting with no perceptible vibration.

Air turbine—made by Atlas Copco, world's largest manufacturer of pneumatic equipment.

Automatic spray—fully adjustable for maximum cooling, or can be shut off completely.

Modern design—Physically and esthetically attractive, with no complex belts and pulleys.

Quiet—No objectionable whine, buzz or grating noises.

Trouble-free—After nine months' continuous service, a contra-angle handpiece required replacement of one $8.00 part.

Insured—Five-year insurance policy guarantees 24-hour spare part availability.

Dentalair

Atlas Copco

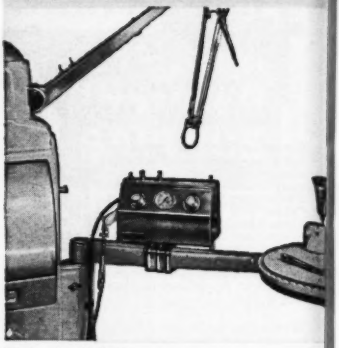
610 Industrial Avenue
Paramus, New Jersey

930 Brittan Avenue
San Carlos, California

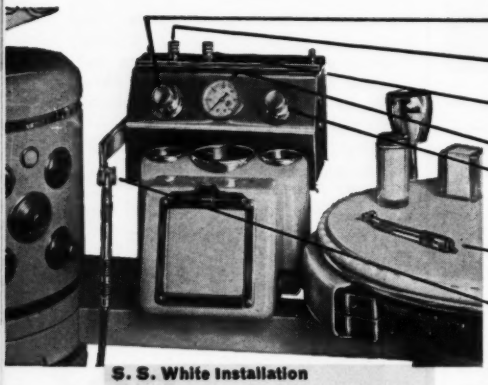
National Representative: Parkell Company, 23-06 31 Avenue, Long Island City 6, N.Y.

For those who waited . . . we present the

Both high and low torque
Built in chip blower
Can be installed on any unit
Improved sleeve for
friction grip burs



Ritter Installation



S. S. White Installation

SELECTOR SWITCH—Gives you choice of coolant air alone or spray.

SPRAY ADJUSTMENT—Spray intensity can be controlled.

BUILT-IN AIR SYRINGE ADJUSTMENT—Air volume of chip-blower controlled.

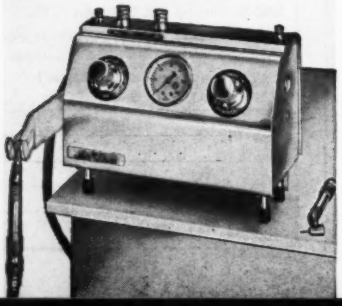
AIR GAUGE—Shows air pressure of air being used.

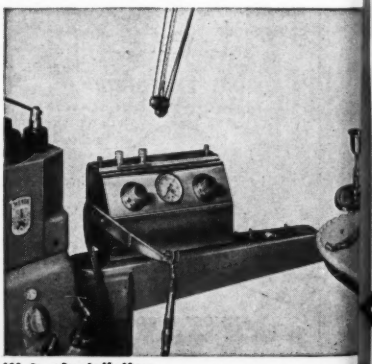
TORQUE ADJUSTMENT AIR REGULATOR—The air pressure can be reduced or increased to regulate speed and torque. A minimum of air reduces torque. Both high and low torque available.

EXTRA CONTRA ANGLE HANDPIECE FURNISHED—A spare contra angle eliminates "inoperational periods".

ANGLE PLACED AT LEFT OF CONTROL UNIT—Air hose is out of the way of the patient's legs and more accessible to the dentist.

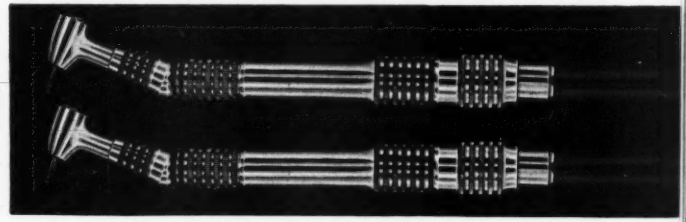
Air-Drive "400" Table Model





Weber Installation

the more quiet **air-drive**



LOOK AT THESE EXCLUSIVE FEATURES:

- Unique design which makes it **more quiet... 70-75 decibels**
- **Two contra angles furnished**...you will never be out of service
- **Torque variable** according to your needs...high torque for bulk removal... low torque if desired for children or finishing operations
- **Small disposable oil cartridge,** assuring fresh oil supply at all times...oiler activates immediately
- **More durable friction grip bur sleeves** which eliminate bur flutter
- **4 micron particle size air filter**...increases bearing life

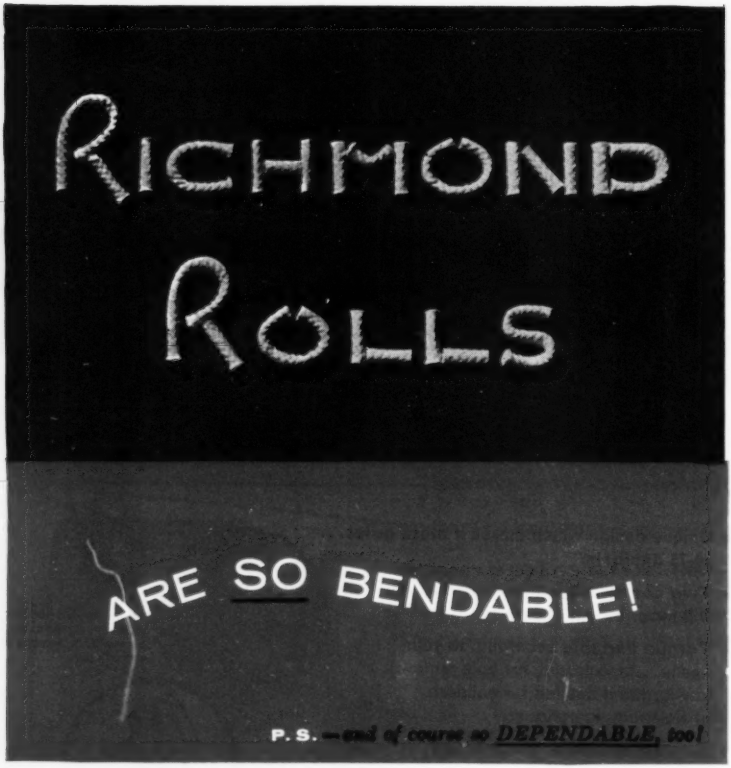
Contra angle connected to left side of control box—readily accessible to operator yet out of patient's way.

Exclusive tapered head improves visibility of bur area.

Improved water spray brings coolant closer to bur, eliminating a "coolant free" pocket around the bur. Eliminates odor from cutting tooth structure.

Built-in Air Syringe for chip removal eliminates need for hanging up angle and picking up air syringe... a fatiguing operation performed hundreds of times a day... no need to take your eye off the field of operation.

AIR-DRIVE DIVISION:
Midwest Dental Mfg. Co., 4439 West Rice Street, Chicago 51, Illinois



Because Richmond Rolls are pure absorbent cotton throughout, they bend easily to the buccal curvature, fit snugly to absorb rapidly. And because there is no starchy coating, Richmond Rolls do not stick to tender mucosa. Only Richmond Rolls have the patented spiral winding around long staple cotton fibers arranged lengthwise to provide the unique and more efficient "wicking" action.

Pat. No. 2,608,901

WRITE FOR SAMPLES

RICHMOND DENTAL COTTON CO.

1100 HAWTHORNE • CHARLOTTE 1 • NORTH CAROLINA

"Manufactured Where Grown"

nebs *by Norwich...*

a new and valuable aid in routine mild analgesia

Nebs contains acetyl-p-aminophenol (APAP) the metabolite of acetanilid and phenacetin which accounts for the analgesic and antipyretic action of both drugs but without their side effects.

Nebs does not contain salicylates in any form.

Nebs is absorbed rapidly and readily reaches therapeutic levels.

Nebs is outstanding in the relief of the minor but painful discomforts of headaches, arthritis, sinusitis and neuritis.

Nebs causes no gastric upset or salicylism and does not alter the blood picture in any way.

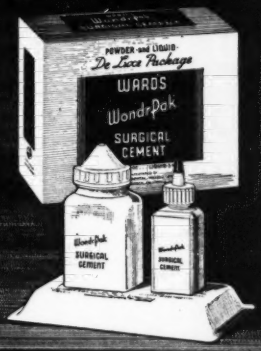
Nebs is particularly useful with patients allergic or sensitive to aspirin. It causes no symptomatic changes in peptic ulcer patients and is of value in geriatric cases in that it does not cause constipation as codeine often does.

NEBS . . . FOR FAST RELIEF
WITHOUT ASPIRIN

5 grain tablets of acetyl-p-aminophenol in bottles of 30; strips of 9

Another Fine Norwich Product Norwich®

WONDRPAK
Surgical Cement



Now in the New De Luxe Package

A modern dispenser-container —*just tip and squeeze.* Same reliable, time tested WONDRPAK now in *colorless** liquid with colored power for pink mix; also white powder for white mix. Use WONDRPAK after extractions, after pyorrhea surgery, to protect operated areas, prevent dry sockets. Allays pain quickly.

** Colored liquid not sold in De Luxe package; only in regular package—in glass bottles.*

Send for catalog of complete line of Westward Products

WESTWARD
DENTAL PRODUCTS CO.
1037 Polk Street, San Francisco 9, California

Advanced design for HIGH-SPEED

FIG. 100b — 171L 172L
FIG. 17 — 170 171
FIG. 15 — 57 58

BUSCH-WIDIA
SUPER-CARBIDE BURS

are now available in plain fissure—exceptionally adaptable for high speed techniques.

Stocked in 1/16" shanks for Page-Chayes or Airotor handpieces, as well as for regular right angle. (Figs. 15 and 17 also come in straight handpiece.)

Order from your dealer today or write direct, specifying dealer's name.

Pfingst & Company Inc.
62 Cooper Sq., New York 3, N. Y.

more than just mechanical cleansing...

WRITE FOR SAMPLES

Caroid Dental Powder keeps teeth sparkling clean and free from protein food particles that brushing alone cannot reach. Caroid®—the potent mucosolvent and protein digestant—thins tenacious oral mucin, and helps prevent the formation of soft tartar.

for everyday use:

- cleans and polishes teeth *safely*
- raises pH of the oral cavity to inhibit growth of acid-forming bacteria
- cleans vulcanite and acrylic dentures
- removes stains from metal

American Ferment Co., Inc. • 1450 Broadway • New York 18, N.Y.

Accepted COUNCIL on DENTAL THERAPEUTICS AMERICAN DENTAL ASSOCIATION

helps your patients to master their new dentures (only N. F. Gums used)

KLING®
Dental Plate Adhesive

CO-NIB

for

TEETHING PAINS

"gives prolonged relief. Children and babies do not 'fight' it. It makes my work easier and parents happier." OVER 15 YEARS of professional use. Available at pharmacies in 1/4 oz. tubes.

Sample and Literature On Request

ELBON LABORATORIES
SPARTA, N. J.

The Ultimate In *Craftsmanship*

$12.50

Full size parts are engineered into a shorter design without latch. All materials are stainless and non-corrosive . . . hardened where needed for extra wear. Furnished for Doriot hand pieces with bushing for hexagonal nose, $1.00 extra.

Order From Your Dealer

Young Dental Mfg. Co., St. Louis 8, Mo.

BS POLISHING ANGLE

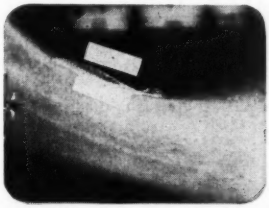
ATTENTION!!

Oral Surgeons and Prosthodontists

NOW AVAILABLE

Cobalt Platinum Magnetic Implants

To Aid Full Denture Retention



Order thru your own Dental Dealer or direct

MAGNETIC MEDICAL & DENTAL PRODUCTS, INC.
178 Bay State Road, Boston 15, Mass.

Check quantity of Magnet Sets desired.

Complete set of 6 (2 Implant, 2 Denture, 2 Laboratory) @ .....$100.00 ☐

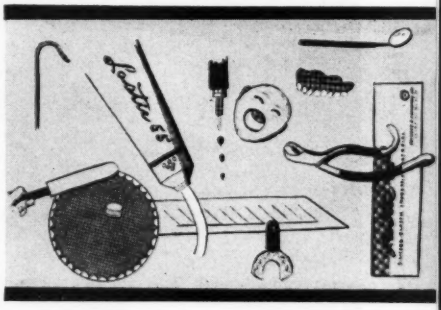
Complete set of 4 (2 Implant, 2 Denture) @ .....$75.00 ☐

Complete set of 2 (2 Laboratory) @.....$25.00 ☐

Complete Information Brochure .... ☐

Implant Magnets with PLAIN TANTALUM SCREENS without TEFLON COATING—available by special order.

IMPRESSIONISM



You'll get accurate impressions with

Lastic 55

A basically different Silicone Elastic impression material. Produces accurate, rubber-like reproductions with excellent body. Permanently impervious to shrinkage, and with outstanding heat and aging resistance.

Write for literature

At all good dealers

Pfingst & Company, Inc.
62 Cooper Sq., New York, N.Y.

Fine dental instruments are judged by the *high standards* you establish. To be sure of equal quality in a toothbrush for your patients, prescribe an Oral B.

This softer brush is designed to protect both *teeth* and *gums* effectively. The gentle action of more than 2500 very thin synthetic bristles with smooth tops makes this possible. Try one yourself and feel the difference.

In 3 sizes for all the family

AMERICAN DENTAL ASSOCIATION 100 YEARS 1859 · 1959

Oral B TOOTHBRUSH

Oral B Company · San Jose, California · Toronto, Canada

120B

Relax
and save time

with Handform Instruments

Each Handform instrument is scientifically designed to perform its specific function, resulting in greater comfort and ease of handling, even when performing delicate operations.

You'll enjoy working with them. During a busy day your fingers and wrist will never ache from "dentist's cramp," caused by using conventional, pencil-thin instruments.

Rustless with stainless steel points

At all good dealers Write for new catalog

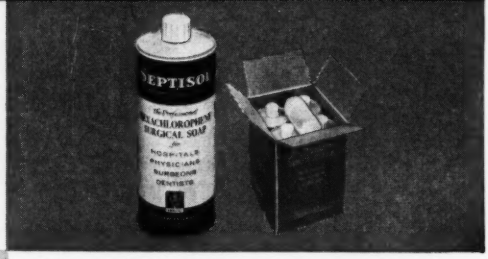
Pfingst & Company, Inc.

62 Cooper Square, New York 3, N.Y.

the NEW professional foot operated SEPTISOL Jr. DISPENSER *price* $13.95 *and...*

repeating our introductory combination offer!

...ONE GALLON (4 one quart cans) of SEPTISOL ANTISEPTIC LIQUID SOAP *price* $6.75 *per gallon*



~~$20.70~~

BOTH FOR $14.95

ACT NOW

THIS OFFER GOOD FOR LIMITED TIME ONLY

VESTAL

The NEW SEPTISOL Jr. DISPENSER . . . a new foot-operated soap dispenser that functions exactly as the famous SEPTISOL® dispenser. *Professional in appearance—professional in action.*

UNCONDITIONALLY GUARANTEED FOR 2 YEARS.

SEPTISOL ANTISEPTIC LIQUID SOAP: The surgical soap of choice in over 4,000 hospitals throughout the United States . . . used in the offices of over 40,000 physicians and dentists.

VESTAL INC., 4963 MANCHESTER, ST. LOUIS 10, MO.

Gentlemen: I'd like to take advantage of this Special Combination Introductory Offer.

Please send me _____ SEPTISOL Jr. DISPENSERS

_____ GALLONS OF SEPTISOL

NAME_____

ADDRESS_____

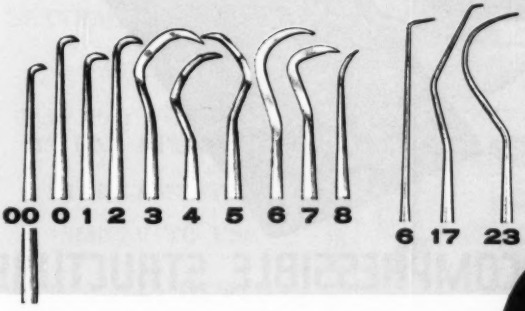
CITY_____ STATE_____

MY DEALER_____

NOW R&R Stainless

Surgical Steel Morse

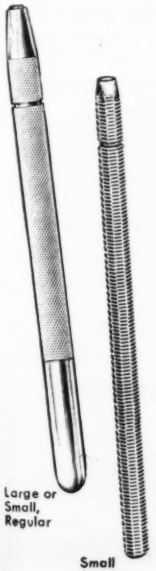
SCALERS *and* EXPLORERS



AMERICAN DENTAL ASSOCIATION 100 YEARS 1859 · 1959

45¢

CHANGE ONLY THE POINT



ALWAYS A SHARP INSTRUMENT. A new sharp instrument can be inserted in the chuck type handle as quickly and easily as replacing a bur in a handpiece.

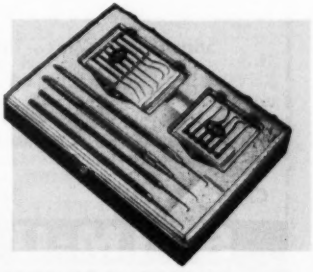
ECONOMICAL. You can use a new Morse Scaler or Explorer Point for only 45c . . . less than ¼ the cost of a good long-handled instrument. Lower cost than resharpening a conventional Scaler Instrument.

STAINLESS STEEL. Assures freedom from corrosion during sterilization.

NEW PACKAGE

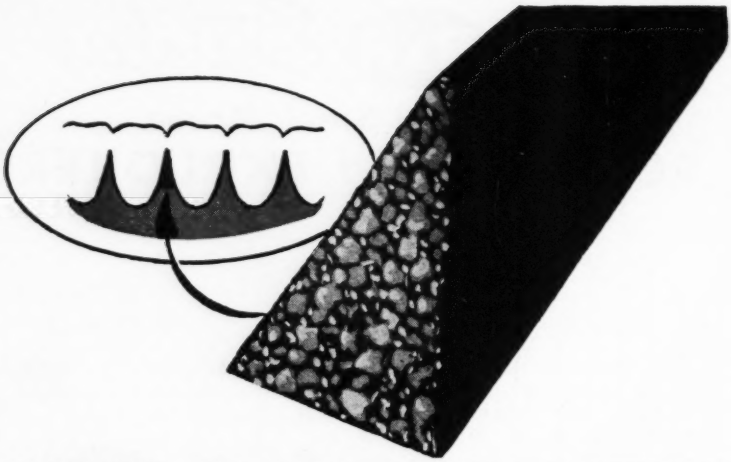
Today's Best Buy!

New R&R Morse Scaler-Explorer Package contains handy assortment of 10 Scalers, 6 Explorers, 4 Handles. Ask your dealer.



THE RANSOM & RANDOLPH CO.

Toledo, Ohio . . . Established 1872



POROUS COMPRESSIBLE STRUCTURE and TRIANGULAR SHAPE

OF STIM-U-DENTS WHEN MOISTENED FORM A PERFECT FIT IN THE INTERPROXIMAL SPACES — THEY CLEAN . . . THEY CLEANSE . . . THEY GENTLY MASSAGE

Literally thousands of dentists have written us attesting the merits and effectiveness of STIM-U-DENTS and indicating their many specific uses.

- **FOR BLEEDING GUMS**
- **FOR RECEDING GUMS**
- **FOR SOFT, SPONGY GUMS**
- **EXCESSIVE CALCULUS ACCUMULATION**
- **AFTER PROPHYLAXIS**
- **THE TREATMENT OF VINCENT'S INFECTION AND OTHER GUM PATHOSIS**
- **CLEANING TRAUMATIZED AREAS**
- **CLEANING AROUND BRIDGES**
- **EFFECTIVELY USED WITH ORTHODONTIC APPLIANCES**
- **REVEAL CAVITIES AND LOOSE FILLINGS**

An invaluable aid to prevention and treatment of PYORRHEA and GINGIVITIS

Ask For FREE SAMPLES for Patient Distribution.

Stim-U-Dents, Inc., 14035 Woodrow Wilson, Detroit 38, Mich.

☐ **Send Free Samples for patient distribution.** OH 2-59

Dr._____

Please enclose your Professional Card or Letterhead

Address_____

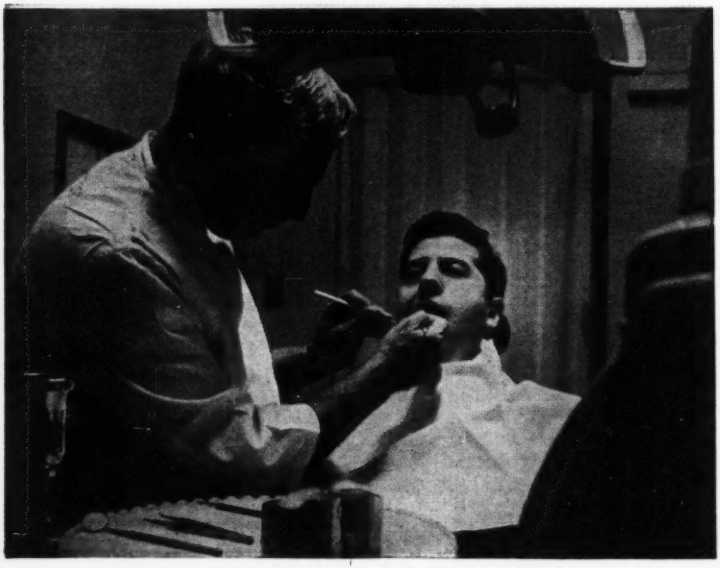
City_____ **Zone**_____ **State**_____

STIM-U-DENTS

FINISH WHAT THE TOOTHBRUSH LEAVES UNDONE

A report of clinical findings published to date:

Thermodent™ Tooth Paste relieved and controlled hypersensitive teeth in 79.2% of the cases studied



No. of patients included in each study

Thermodent as an aid to everyday management of hypersensitivity

Published reports of clinical investigations show that patients who experience tooth pain from hot and cold or sweet and sour foods—as well as during cold weather—benefit measurably from regular brushings with Thermodent. In 571 observations on 92 patients, it was found that 42% of the patients had complete relief of dentine hypersensitivity—and 30% "good" relief—during regular use of Thermodent. All 92 patients "reported at least some benefit."[3]

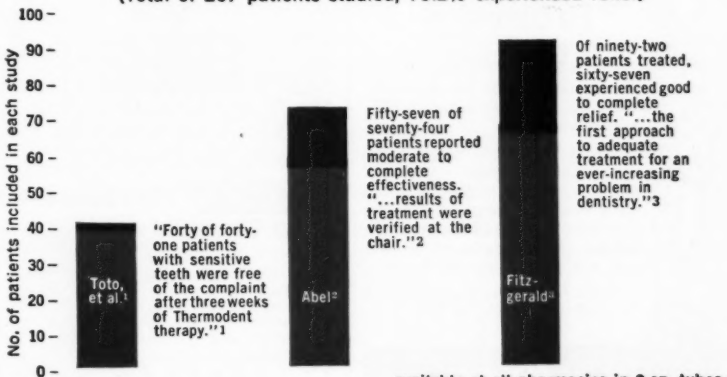
The reduced sensitivity afforded by Thermodent allows routine and thorough brushing for patients formerly unable to maintain proper oral hygiene. In addition, office visits are less painful because sensitivity to instrumentation is diminished—making for better patient cooperation and a saving of valuable chair time.

Thermodent for relief during painful dental procedures

In periodontia, for example, extreme dental sensitivity is normally encountered. In a recent study restricted to periodontal patients, the effectiveness of Thermodent as a desensitizing agent was shown by the following results: 97% of the patients experienced complete relief from hypersensitivity after three weeks of Thermodent brushing, yet control subjects with sensitive teeth "were not free from the complaint after five weeks on a placebo."[1]

SUMMARY OF RECENT THERMODENT CLINICAL STUDIES

(Total of 207 patients studied; 79.2% experienced relief)



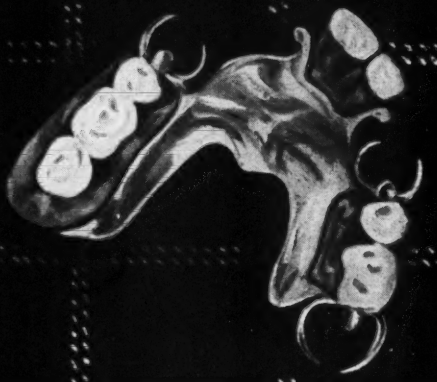
1. Toto, P. D.; Staffileno, H., and Gargiulo, A. W.: J. Periodontology 29:92 (July) 1958. 2. Abel, I.: Oral Surg. 11:491 (May) 1958. 3. Fitzgerald, G.: Dental Digest 62:494 (Nov.) 1956.

available at all pharmacies in 2-oz. tubes

Thos. Leeming & Co. Inc.

155 East 44th Street, New York 17, N. Y.

the best still costs less!



at Federal PROSTHETICS, INC.

661-667 FULTON STREET — BROOKLYN 17, NEW YORK

When your Laboratory is located in a low rent district . . . utilizes the finest materials and most streamlined methods . . . trains its own technicians who are masters of modern techniques . . . does business by mail without costly pick up and delivery services . . . eliminates the expensive luxury of credit — big savings must be effected without any compromise in quality.

Quality and Economy are the reasons why nearly 5,000 discriminating Dentists from every section of the United States use Federal Prosthetics routinely for the finest chrome-cobalt castings . . . precise gold restorations . . . acrylic full and partial dentures that are superior.

Service is speedy — only a few days after receipt of your order. One trial will convince you that Federal will save you time and save you money.

Federal
PROSTHETICS, INC.

FEDERAL PROSTHETICS, INC.
661-667 Fulton Street
Brooklyn 17, N. Y. OH 2-59

☐ Please send me, without obligation or cost, your latest color brochure and Price List of Federal Laboratory Services.

Dr._____

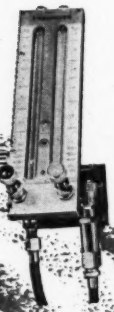
Street_____

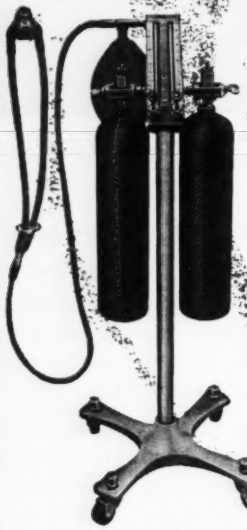
City_____

Zone_____ State_____

FOREGGER

ANALGESIA APPARATUS FOR DENTISTRY





EASY-TO-USE

COMPACT

SAFE

PORTABLE

ECONOMICAL

More and more dentists are using analgesia technique to assist patients through difficult dentistry. FOREGGER apparatus is inobtrusive, simple to operate and does not alarm patient.

LANGANALGESIA APPARATUS

(for small cylinders only)
complete w/Langa Nasal Inhaler and medium nose piece **$280.00**
to use Large "G" Cylinders add:
1 ea. N_2O, O_2 • #162—L reducing valve **@$40.00-80.00**
2 lengths #171 high pressure tubing (standard 8') **@$16.00-32.00**

ANALGESIA WALL UNIT

(for large "G" cylinders only)
complete with/Langa Nasal Inhaler, medium nose piece, 2-8' length high pressure tubing w/female Schrader connections **$262.00**
Optional: N_2O & O_2 reducing valves **@$40.00 ea.**
Longer hoses @ **$.35** per additional foot.

ACCESSORIES: LANGA NASAL INHALER (for Foregger, McKesson or Heidbrink Machines) **$35.00**

THE FOREGGER COMPANY, INC.
Since 1914 leaders in the design and manufacture of anesthesia apparatus.

Office and Plant:
ROSLYN HEIGHTS, L. I., N. Y.
Mayfair 1-1133

Representatives in principal cities of the U. S. • World-wide Representation

15c per word, initials and figures used each counting as one word. Please send your remittance with your order.

WANT ADS

Restricted to help and positions wanted, and practices wanted, and practices for sale. The minimum charge is $6.

FOR SALE: Fully equipped dental office with x-ray. Equipment not new but in good condition. Sell reasonably. Fine opportunity for recent graduate. Inquire of Mrs. F. O. Holland, Clarence, Missouri.

DENTIST WANTED with Nebraska license for downtown Omaha office. For details write "HD" Oral Hygiene, Pittsburgh, Pa.

Space available for dentist's office in thriving shopping center on Brownsville Road between Carrick and Mt. Oliver, Pittsburgh, Pa., telephone MO. 1-5900.

FOR SALE: Due to death, long-established dental practice and equipment located in South Hills section of Pittsburgh, Pennsylvania. Reasonably priced. "HM" Oral Hygiene, Pittsburgh, Pa.

HERE IS AN OPPORTUNITY for a top flight dentist to practice ideal dentistry in a model clinic, to participate in the stimulating environment of an ethical group practice, and to be free of financial pressures. No investment. Starting salary up to ten thousand dollars depending upon experiences and skills, plus other benefits. Full or part time. Dr. Jay W. Friedman, Director, 115 15th Avenue, North, Seattle, Wn.

FOR LEASE: Orthodontist's or Oral Surgeon's suite; new building to be completed in September, 1959. Will have three established general dentists. Tenant can design own office now. Six other general dentists and three physicians immediate area; no orthodontist or surgeon. Terrific growth area, excellent potential. Near schools. University town of Palo Alto. Dr. Stewart W. Mitchell, 615 University Ave., Palo Alto, Calif., 'phone DA 5-1058. . . . . .

FOR SALE: Settling an estate. Late Dr. H. E. Emerson. Kerr's Super-speed handpiece, used only three months, and Kerr's imperator. Both for $200, total, with selection of burs. Dr. J. F. Barton, 43 Farmington Ave., Hartford 5, Conn.

FOR SALE: Almost complete setup for two-chair office with large amount of supplies. Good condition and reasonably priced if sold at once. Retiring. Central New York. "HE" Oral Hygiene, Pittsburgh, Pa.

FOR SALE: Well-equipped office in growing city of two hundred thousand. All equipment, instruments and supplies for general practice. Exceptional opportunity. Contact Mrs. K. A. Leake, 3620 Monte Vista Blvd., N.E., Albuquerque, New Mexico, 'phone Alpine 5-1447.

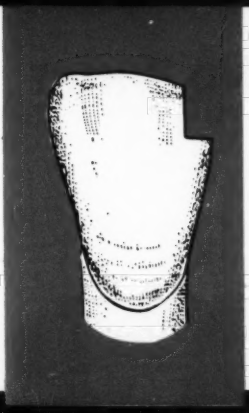
WANTED: Used modern equipment. Prefer Ritter G Unit, motor chair, x-ray 90 KVP. Reply immediately giving accurate description and condition and lowest selling price in the first letter. "HG" Oral Hygiene, Pittsburgh, Pa.

NORTHWEST DETROIT: Five operating rooms, two new Ritter H, two Tridents with Airotors, one room for hygienist, five x-ray units; two dentists, combined gross over eighty thousand dollars. Building and two practices for sale; sixty thousand dollars. "HJ" Oral Hygiene, Pittsburgh, Pa.

FOR SALE OR RENT: One of the South Jersey's finest locations; ultra modern office and home combination; living quarters, seven rooms, two baths; office quarters, four treatment rooms, consultation room, waiting room and two baths. Recreation room on same level. "HK" Oral Hygiene, Pittsburgh, Pa.

HUNTINGTON PARK, CALIF.—Corner location, fully equipped dental office building, 2478 square feet, type 3 masonry walls with basement. Completely air conditioned. Two short blocks from main street and transportation. Six operating rooms, spacious dental laboratory, reception room, business office, etc. "HR" Oral Hygiene, Pittsburgh, Pa.

Retiring after February first after fifty years, complete office in good condition. Ex-Mayor of East Hampton, L.I., New York. Dr. F. Russell, East Hampton, N. Y.



NOW — anterior fillings
with the
lifelike lustre
of porcelain . . .
marginal seal of gold . . .
packing ease
of amalgam!

ACHATITE

reinforced filling material
high-strength glass fibers in a silicate base

Now — in one filling material — you get all the features you need for lasting, natural-looking restorations. **ACHATITE** fillings have extremely high impact, biting and incisal edge strength . . . exceptional resistance to stain, shrinkage, washout. The material handles as easily as amalgam, sets in 4 to 5 minutes, creates no heat. **ACHATITE** is recommended for all anterior fillings — for use in deciduous teeth — and for mouth breathers. **ACHATITE** is supplied in 10 basic colors, providing a full range of blending and matching possibilities.

Write for detailed literature

Order from your ACHATITE dealer today

Satisfaction guaranteed

VIVADENT CORP.
30 PINE STREET, WOBURN, MASS.

WHO'S WHO AND WHERE

Although we aim for accuracy in this index, last-minute changes often alter page numbers and positions.

NOW! A COMPLETE line of 1/16 inch SHANK CUTTING TOOLS

MOUNTED POINTS
CARBIDE BURS
DIAMOND INSTRUMENTS

especially developed for use with the **PAGE-CHAYES** and other Ultra Speed Handpieces

Chayes DENTAL INSTRUMENT CORP.

Miry Brook Road at Danbury Airport
Danbury, Conn.

CARBIDE BURS: The finest in design and manufacture with special flute contour to assure keenness of cutting edge and freedom for discharge of debris.

MOUNTED POINTS: These can be dressed for concentricity. Green mounted points for gross reduction, occusal equilibration. White mounted points for polishing synthetic restorations, as well as burnishing the margins of gold castings.

DIAMOND INSTRUMENTS: Particle size selected for best possible blend of cutting efficency, smoothness of cavo surface and long life. Balanced concentric accurately sized shanks.

Do you have your copy?

Write for copy of illustrated brochure showing entire line in actual size.

Chayes DENTAL INSTRUMENT CORP.

Miry Brook Road at Danbury Airport • Danbury, Conn.

For service on any Chayes product, be sure to send to our new address listed above.

NEY

AMERICAN DENTAL ASSOCIATION 100 YEARS 1859 · 1959

The occlusal rest

FIG. A

FIG. B

FIG. C

Occlusal rests supply a substantial portion of the support required for the clasp type of partial denture. They must resist the heavy masticatory load and yet maintain the correct clasp-to-tooth relationship. Sometimes no rest seat is prepared in the abutment tooth, leaving only room enough for a thin rest which soon breaks (Fig. A).

The rest preparation in the abutment tooth should be definite but not box-shaped as in Fig. B. A sharp angle at the marginal ridge produces a corresponding angle in the casting that may cause fracture.

The ideal rest preparation (Fig. C) is spoon-shaped with its floor at right angles to the long axis of the tooth. Bucco-lingually its width is about one-half the distance between the buccal and lingual line angles of the surface involved. Sharp angles are smoothed and the prepared enamel surface is carefully polished.

SAY **NEY** BEFORE YOU SAY *Gold*

(Prepared under the direction of competent dental authority.)

NEY-ORO
A-1 inlays
B-2 bridges
G-3 partials

THE J. M. NEY COMPANY
HARTFORD, CONNECTICUT

to clean dentures effectively but with safety recommend Wernet's Dentu-Creme & Denture Brush

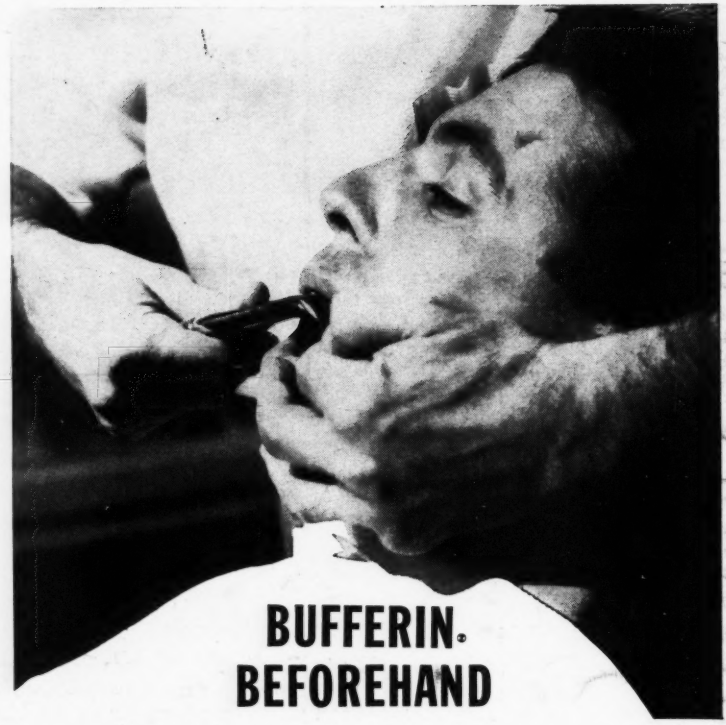
Wernet's Dentu-Creme and Denture Brush provide an ideal combination for quick, thorough cleansing—food particles, plaque and stains are removed from teeth and denture without danger to delicate detail.

The Denture Brush, functionally designed with two tufts of resilient yet sturdy bristles, reaches all parts of the denture. Dentu-Creme's foaming action helps cleaning power penetrate every crevice and groove.

Dentu-Creme can be used with confidence on all denture materials . . . it is more effective than ordinary tooth paste or mild soap, and so much safer than harsh alkaline chemicals or gritty household cleansers.

Patients will appreciate your recommendation of these fine products which are pleasant to use . . . and far better for the denture, too!

BLOCK DRUG COMPANY, INC. 105 ACADEMY STREET JERSEY CITY 2, N.J.



BUFFERIN. BEFOREHAND

makes them better patients

When you recommend BUFFERIN before office visits, you and your patients both benefit. The "prophylactic" blood salicylate levels thus obtained will help assure patient comfort during routine procedures. The result is better cooperation to save your chair time.

Before cavity preparation or before and after extraction, the mild analgesic effect of BUFFERIN is often all that is needed to relax the patient. Besides acting twice as fast as aspirin, BUFFERIN provides prolonged protection yet is better tolerated than aspirin. BUFFERIN is thus especially beneficial for the relief of toothache.

Recommend beforehand use of BUFFERIN to your patients today. Suggest a dosage of two 5 gr. tablets before leaving home for your office and see the difference it will make.

Each sodium-free BUFFERIN tablet contains acetylsalicylic acid, 5 grains, and the antacids magnesium carbonate and aluminum glycinate.

BUFFERIN—ANOTHER NE PRODUCT OF BRISTOL-MYERS